

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000039390

Entity Name: FM PARTNERS, L.L.C.

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

1682 W. HIBISCUS BLVD
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

1682 W. HIBISCUS BLVD
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 20-1718014

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EVANS, ARTHUR F III
1682 W. HIBISCUS BLVD
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

EVANS, HUGH M JR.
1682 W. HIBISCUS BLVD
MELBOURNE, FL 32901 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HUGH M. EVANS, JR.

04/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: EVANS, ARTHUR F III
Address: 1682 W. HIBISCUS BLVD
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM () Delete
Name: EVANS, HUGH M JR
Address: 1682 W. HIBISCUS BLVD
City-St-Zip: MELBOURNE, FL 32901

Title: MGRM () Delete
Name: JELUS, TIMOTHY C
Address: 1682 W. HIBISCUS BLVD
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HUGH M. EVANS, JR.

MGRM

04/18/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date