2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041013

Entity Name: AHF FLORIDA, LLC

Address:

City-St-Zip:

1169 HARVEY LAND, #148

AUSTIN, TX 78702

FILED Apr 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8415 N. ARMENIA TAMPA, FL **Current Mailing Address: New Mailing Address:** 1800 S. WASHINGTON, SUITE 311 AMARILLO, TX 79102 FEI Number: 20-0281299 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES: Title: MGR () Delete (X) Change () Addition COOPER, LOIS BURNETT, STEPHANIE Name: Name: 400 SW 15TH STREET, PLEMONS COURT Address: 2000 S.E. 28TH STREET, 3618 Address: City-St-Zip: AMARILLO, TX 79101 City-St-Zip: AMARILLO, TX 79103 Title: MGR Title: () Delete () Change () Addition FLETCHER, J.I. Name: Name: Address: **3415 TRIPP** Address: City-St-Zip: AMARILLO, TX 79121 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition HARWELL, ANTHONY L DR SHARP, RANDY Name: Name: 15 CLOISTER PARKWAY Address: Address: 3515 STROMBERG City-St-Zip: AMARILLO, TX 79121 City-St-Zip: AMARILLO, TX 79121 Title: MGR () Delete Title: () Change () Addition RICE, SCOTT Name: Name: Address: BRUSH RANCH CAMPS, HCR 73, BOX 32 Address: City-St-Zip: TERERRO, NM 87573 City-St-Zip: Title: MGR () Delete Title: () Change () Addition STERQUELL, BETTY Name: Name: 5501 EVERETT Address: Address: City-St-Zip: AMARILLO, TX 79106 City-St-Zip: Title: () Delete Title: () Change () Addition USSERY, BETTY Name: Name:

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.

Address:

City-St-Zip:

SIGNATURE: J.I. FLETCHER MGR 04/06/2005