2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000041220

City-St-Zip:

Entity Name: INTERPLAN ATLANTA LLC

FILED May 05, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 933 LEE ROAD, SUITE 120 1007 WEATHERSTONE PARKWAY ORLANDO, FL 32810 SUITE 120, BUILDING 100 WOODSTOCK, GA 301884497 US **Current Mailing Address:** New Mailing Address: 933 LEE ROAD, SUITE 120 ORLANDO, FL 32810 FEI Number: 20-0344028 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: KOLTUN, JEFFREY M ESQ 557 NORTH WYMORE ROAD, SUITE 100 MAITLAND, FL 32751 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:** () Delete MGRM () Change (X) Addition BOYCE, DAVID Name: Name: Address: Address: 933 LEE ROAD, SUITE 120 City-St-Zip: City-St-Zip: ORLANDO, FL 32810 Title: Title: MGR () Change (X) Addition () Delete TRAHAN, FRANCOIS Name: Name: Address: Address: 933 LEE ROAD, SUITE 120 City-St-Zip: City-St-Zip: ORLANDO, FL 32810 Title: () Delete Title: MGR () Change (X) Addition EUSTACE, ANNEMARIE Name: Name: 933 LEE ROAD, SUITE 120 Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32810 Title: () Delete Title: MGR () Change (X) Addition Name: Name: MCCOIG, KENNETH Address: Address: 933 LEE ROAD, SUITE 120 City-St-Zip: City-St-Zip: ORLANDO, FL 32810 Title: () Delete Title: MGR () Change (X) Addition STILWELL, CLARK Name: Name: 933 LEE ROAD, SUITE 120 Address: Address: City-St-Zip: City-St-Zip: ORLANDO, FL 32810 Title: () Delete Title: () Change (X) Addition JACOBY, HARVEY Name: Name: Address: Address: 933 LEE ROAD, SUITE 120

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.

City-St-Zip:

ORLANDO, FL 32810

SIGNATURE: DAVID G. BOYCE MGRM 05/05/2004