

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042085

Entity Name: LEMAR FINANCE LTD. CO.

FILED  
May 26, 2005  
Secretary of State

## Current Principal Place of Business:

360 SOUTH SHORE DRIVE  
SARASOTA, FL 34234

## New Principal Place of Business:

1333 NORTH DUVAL STREET  
TALLAHASSEE, FL 32302

## Current Mailing Address:

360 SOUTH SHORE DRIVE  
SARASOTA, FL 34234

## New Mailing Address:

1333 NORTH DUVAL STREET  
TALLAHASSEE, FL 32302

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

## Name and Address of Current Registered Agent:

FLETCHER, W. RICK  
360 SOUTH SHORE DRIVE  
SARASOTA, FL 34234 US

## Name and Address of New Registered Agent:

FLORIDA FILING & SEARCH SERVICES, INC.  
1333 NORTH DUVAL STREET  
TALLAHASSEE, FL 32302 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: PAUL HODGE

05/26/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: MAGARIL, ALEXANDER  
Address: 35 BARRACKS ROAD  
City-St-Zip: BELIZE CITY, BELIZE, C.A.,

## ADDITIONS/CHANGES:

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: JANET M. CARUCCIO, ATTRNY-IN-FACT FOR MGR

MGR

05/26/2005

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