

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000045477

FILED
Apr 29, 2005
Secretary of State

Entity Name: WALDEN PROPERTIES, LLC

Current Principal Place of Business:

700 SOUTH MAIN STREET
LABELLE, FL 33935

New Principal Place of Business:

Current Mailing Address:

700 SOUTH MAIN STREET
LABELLE, FL 33935

New Mailing Address:

FEI Number: 20-0931743

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DENNING, BONNIE M
11828 GRAND ISLES LANE
FORT MYERS, FL 33913 US

Name and Address of New Registered Agent:

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:

Title: MGR () Delete
Name: DENNING, SHERRI G
Address: P.O. BOX 1518
City-St-Zip: LABELLE, FL 33975

Title: MGR () Delete
Name: WALLACE, KENNETH A
Address: 5610 DIVISION DRIVE
City-St-Zip: FORT MYERS, FL 33905

Title: MGR () Delete
Name: DENNING, ROGER D
Address: P.O. BOX 1518
City-St-Zip: LABELLE, FL 33935

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: SHERRI G. DENNING

MM

04/29/2005

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