2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 23, 2005 08:00 AM DOCUMENT # L03000045955 **Secretary of State** BENTWOOD LANE PROPERTIES, L.C. Principal Place of Business ____ Mailing Address 1904 SAN MARCO BLVD. 1904 SAN MARCO BLVD. JACKSONVILLE, FL 32207 JACKSONVILLE, FL 32207 02102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For NOT APPLICABLE Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SLAGLE, SUSAN ESQ DO NOT WRITE 1201 SAN AMARO ROAD JACKSONVILLE, FL 32207 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGRM TITLE FOSTER, PAULA NAME STREET ADDRESS 1904 SAN MARCO BL, #4 CITY-ST-ZIP JACKSONVILLE, FL 32207 10000U239988 23/U5—80011—019 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TETLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS City-St-7IP

11. I hereby certify that the information supplied with this filing does not qualify 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 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: