2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

SIGNATURE:

FILED Mar 25, 2005 08:00 AM DOCUMENT # L03000047315 **Secretary of State** MARR LLC Mailing Address Principal Place of Business **533 EAST PINE AVENUE 533 EAST PINE AVENUE** ST. GEORGE ISLAND, FL 32328 ST. GEORGE ISLAND, FL 32328 03232005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 41-2070696 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent MARR, KEN DO NOT WRITE 533 EAST PINE AVENUE ST. GEORGE ISLAND, FL 32328 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 famillar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulared when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE MARR, KEN NAME 533 EAST PINE AVENUE STREET ADDRESS CITY-ST-ZIP ST. GEORGE ISLAND, FL 32328 TITLE U00000276608 03/25/05-80047-013 55.00 NAME STREET ADDRESS CRY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CTTY-ST-ZIP TITLE NAME STREET ADDRESS CATY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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.

SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE