2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000051692

1. Entity Name

LISENBY PROPERTIES, L.L.C.



Principal Place of Business

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NALTE STREET ADDRESS CITY-ST-ZIP

Mailing Address

1212 LEE AVENUE, SUITE 100 TALLAHASSEE, FL 32303

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FILED

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SECING TARY OF STATE TALLAHASSEE, FLORIDA





03252005 No Chg-LLC

CR2E083 (10/03)

. FEI	Number	
20	-0509675	

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GOLDBERG, STUART E ESQ. 2039 CENTRE POINTE BLVD., SUITE 201 TALLAHASSEE, FL 32308

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	e named entity submits this statement for the purpose of cha tions of registered agent.	anging its registered office or registered agent, or both, in the St	ate of Florida. I am familiar with, and accept
SIGNATURE.			
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00 ue by May 1, 2005		
9.	MANAGING MEMBERS/MANAGERS		•
TITLE	MGRM		
NAME	LISENBY, W. LAMAR		
	4040 LEE AVENUE OUTE 400		

1212 LEE AVENUE, SUITE 100 STREET ADDRESS CITY-ST-7IP TALLAHASSEE, FL 32303 TITLE LISENBY, DORRECE E NAME STREET ADDRESS 1212 LEE AVENUE, SUITE 100 CITY-ST-ZIP TALLAHASSEE, FL 32303 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

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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: Dorrece E. Ausende Do