2005 LIMITED LIABILITY COMPANY

Apr 19, 2005 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # L03000054071 EAST POINT PROPERTIES, L.L.C. Principal Place of Business Mailing Address 2010 BEAVER CREEK DR 2010 BEAVER CREEK DR HAVANA, FL 32333. HAVANA, FL 32333 04132005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0872745 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DOSTER, RUSSELL S DO NOT WRITE 2010 BEAVER CREEK DR HAVANA, FL 32333 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2005 9. MANAGING MEMBERS/MANAGERS MGR TITLE NAME DOSTER, RUSSELL S 2010 BEAVER CREEK DR STREET ADDRESS CITY - ST-ZIP HAVANA, FL 32333 U00000315895 04/19/05-80049-014 50.00 HILE NAME STREET ADDRESS CITY -ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS

11. I hereby certify that the information supplied with this filling does not qualify for the examption 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

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

FILED