

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000054958

Entity Name: MARIANAO, LLC

FILED
Apr 18, 2005
Secretary of State

Current Principal Place of Business:

4399 COMMONS DRIVE E, SUITE 300
DESTIN, FL 32541

New Principal Place of Business:

4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541

Current Mailing Address:

4399 COMMONS DRIVE E, SUITE 300
DESTIN, FL 32541

New Mailing Address:

4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541

FEI Number: 30-0231803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, STEVEN K
4399 COMMONS DRIVE E, SUITE 300
DESTIN, FL 32541 US

Name and Address of New Registered Agent:

HALL, STEVEN K
4399 COMMONS DRIVE EAST
SUITE 300
DESTIN, FL 32541 US

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: STEVEN K. HALL

04/18/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: EARLES, JOHN P IV
Address: 4399 COMMONS DRIVE E, SUITE 300
City-St-Zip: DESTIN, FL 32541

Title: MGR () Delete
Name: LOOMIS EARLES, DEBORAH ANNE
Address: 4399 COMMONS DRIVE E, SUITE 300
City-St-Zip: DESTIN, FL 32541

ADDITIONS/CHANGES:

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: JOHN EARLES

MGR

04/18/2005

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