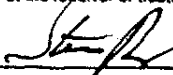


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 18, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000055312 1. Entity Name EXCALIBUR PARTNERS, LLC			
<table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> Principal Place of Business 16260 EAST VIA VENETIA DELRAY BEACH, FL 33484 </td> <td style="width: 50%; vertical-align: top;"> Mailing Address 16260 EAST VIA VENETIA DELRAY BEACH, FL 33484 </td> </tr> </table>			Principal Place of Business 16260 EAST VIA VENETIA DELRAY BEACH, FL 33484
Principal Place of Business 16260 EAST VIA VENETIA DELRAY BEACH, FL 33484	Mailing Address 16260 EAST VIA VENETIA DELRAY BEACH, FL 33484		
DO NOT WRITE IN THIS SPACE			
6. Name and Address of Current Registered Agent SCHRIER, LAURIE B ESQ LAURIE BOLCH, P.A. 582 E WOOLBRIGHT RD #217 BOYNTON BEACH, FL 33435		DO NOT WRITE IN THIS SPACE	
3. 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 _____ (NOTE: Registered Agent's signature required when reinstating) _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable.			
Filing Fee is \$50.00 Due by September 7, 2005			
8. MANAGING MEMBERS/MANAGERS		1100000373245 07/18/05-80007-022 50.00 DO NOT WRITE IN THIS SPACE	
TITLE	MGR		
NAME	ROBERTS, STEVEN		
STREET ADDRESS	16260 EAST VIA VENETIA		
CITY-ST-ZIP	DELRAY BEACH, FL 33484		
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY-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)(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: 		7/12/05 Date Daytime Phone #	