## **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

## FILED Jun 10, 2004 8:00 am Secretary of State

| DOCUMENT # L03000056925  1. Entity Name SECOND CHAPEL VALUE GP LLC  |   |  |  |  |  |  | 06-10-2004             | 90191 (      | )10 ****                       | 33.00  |
|---|---|--|--|--|--|--|------------------------|--------------|--------------------------------|--|
| Principal Place<br>C/O GOODMA<br>777 SOUTH F<br>WEST PALM I   | N PROPER<br>Flagler di                    | TIES, INC.<br>Rive, <del>Ste. 1104</del>   | Mailing Address<br>C/O GOODMAN PROPERTIES, INC.<br>777 SOUTH FLAGLER DRIVE, <del>STE. 1104</del><br>WEST PALM PALM, FL 33401   |  |  | <br>                                   |                        | <br>         |                                |  |
| 2. Principal Place of Business  |   |  | 3. Mailing Address   |  |  |  |                        |              |                                |  |
| Suite Apt. #, etc.<br>Suite 1101E   |   |  | Suite Apt. #, etc.<br>Suite 1101E  |  |  | 06022004                               | Chg-LLC                | CR2E0        | 83 (10/03)                     | - U-d Fax  |
| City & State  |   |  | City & State   |  |  | 4. FEI Numbe                           | 0551231                |              | No.                            | oplied For<br>of Applicable                      |
| Zip   | i   | Country  | Zip  | Coun   | try  |  | of Status Desired      | L/AI         | \$5.00 Add<br>Fee Require      | ditional<br>ed                                   |
| 6. Name and Address of Current R  |   |  | egistered Agent  | Name   | 7. Name and  | Address of New Re                      | egistered /            | Agent        |                                |  |
| SHEWALTER, WILLIAM A<br>777 SOUTH FLAGLER DRIVE, SUITE 110<br>WEST PALM BEACH, FL 33401   |   |  |  |  |  | (P.O. Box Number is Not Acceptable)    |                        |              |                                |  |
|   |   |  |  |  | City   |  |                        | FL           | Zip Coc                        | le   |
| 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 the obligations of registered agent.   |   |  |  |  |  |  |                        |              |                                |  |
| SIGNATURE .   | Signature, typer                          | d or printed name of registered agent and  | title if applicable. (NOTE:  | Registere  | d Agent signature required   | when reinstating)                      |                        | DATE         |                                |  |
| Filing Fee is \$50.00<br>Due by September 8, 2004   |   |  |  |  |  |  |                        |              | ayable to<br>ent of Stat       | ie.  |
| 9. MANAGING MEMBER  |   |  |  |  |  | ADDITIONS/CHANGES                      |                        |              |                                |  |
| J.  | T   | MANAGING MEMBER  |  | -  |  |  | ADDITIONG              | CHANGES      |                                |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | 777 SOU                                   | AN PROPERTIES, INC. ITH FLAGLER DRIVE, SU ALM BEACH, FL 33401  | ☐ Delete   | titu<br>Nam<br>Stre  | 1  |  | ADDITIONO              | CHANGES      | ☐ Change                       | ☐ Addition                                       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | GOODM<br>777 SOU                          | AN PROPERTIES, INC.<br>ITH FLAGLER DRIVE, SU   | ☐ Delete   | TITU<br>NAM<br>STRE<br>CITY<br>TITU<br>NAM<br>STRE   | E EET ADDRESS -ST-ZIP E E EET ADDRESS  |  | ABOTHOROY              | CHANGES      |                                | Addition   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | GOODM<br>777 SOU                          | AN PROPERTIES, INC.<br>ITH FLAGLER DRIVE, SU   | ☐ Delete   | TITLU NAM STRE CITY TITLU NAM STRE CITY TITLU NAM  | E EET ADDRESS -ST-ZIP E E E-ST-ZIP E E E E-ST-ZIP E E  |  | ADDITION               | CHANGES      | ☐ Change                       |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | GOODM<br>777 SOU                          | AN PROPERTIES, INC.<br>ITH FLAGLER DRIVE, SU   | ☐ Delete   | TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY TITLE NAM STRE CITY  | E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E   |  | ABOTTION               | CHANGES      | ☐ Change                       | ☐ Addition                                       |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | GOODM<br>777 SOU                          | AN PROPERTIES, INC.<br>ITH FLAGLER DRIVE, SU   | Delete UTE 1104  Delete  Delete  | TITLU NAM STRE CITY NAM STRE CITY TITLU NAM STRE CITY TITLU NAM STRE CITY TITLU NAM STRE CITY TITLU NAM STRE   | E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E   |  | ADDITION               | ·            | ☐ Change ☐ Change ☐ Change     | ☐ Addition                                       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                                       | GOODM<br>777 SOU                          | AN PROPERTIES, INC.<br>ITH FLAGLER DRIVE, SU   | Delete  Delete  Delete  Delete   | TITLE NAM STRE CITY  | E E E E E E E E E E E E E E E E E E E  |  | ADDITION               | CHANGES      | ☐ Change ☐ Change ☐ Change     | Addition  Addition                               |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | GOODM, 777 SOU WEST P                     | AN PROPERTIES, INC. ITH FLAGLER DRIVE, SL ALM BEACH, FL 33401  The information supplied with the ort is true and any or the ne acceiver trusted.                           | Delete  Delete  Delete  Delete  Delete  Delete  Delete  Delete  Delete   | TITU NAM STRE CITY   | E ET ADDRESS -ST-ZIP  E E ET ADDRESS -ST-ZIP  E E E E E E E E E E E E E E E E E E E  | nade under oath                        | ), Florida Statutes. I | I further ce | Change  Change  Change  Change | Addition  Addition  Addition  Addition  Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | certify that it ton this repability compa | he information supplied with the ort is true and accurate and the any or the receiver or trustee that the period on printed that are period.  AND TYPED OR PRINTED NAME OF | Delete  Delete | TITUL NAM STREET CHY TITUL NAM | E ET ADDRESS -ST-ZIP  E ET ADDRESS -ST-ZIP  E E ET ADDRESS -ST-ZIP  E E ET ADDRESS -ST-ZIP  E E E E E ADDRESS -ST-ZIP  E E E E E E ADDRESS -ST-ZIP  E E E E E ADDRESS -ST-ZIP  E E E E E E ADDRESS -ST-ZIP  E E E E E E ADDRESS -ST-ZIP  E E E E E E E E E E E E E E E E E E E | made under oath<br>iter 608, Florida 5 | ), Florida Statutes. I | I further ce | Change  Change  Change  Change | Addition  Addition  Addition  Addition           |