2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000003327

Address:

City-St-Zip:

Entity Name: LATITUDES N.E. FLORIDA LTD. CO.

FILED Aug 30, 2005 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 4720 AVENUE B SAINT AUGUSTINE, FL 32095 US **Current Mailing Address: New Mailing Address:** P.O. BOX 4034 SAINT AUGUSTINE, FL 32084 US FEI Number: 20-0592283 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JANSE VAN RENSBURG, COENRAAD J 11 AVILES STREET APT. 3C SAINT AUGUSTINE, FL 32084 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition JANSE VAN RENSBURG, COENRAAD J Name: Name: Address: 11 AVILES STREET, APT. 3C Address: City-St-Zip: SAINT AUGUSTINE, FL 32084 US City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: HOLIDAY, ELIZABETH M 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: JANSE VAN RENSBURG, COENRAAD, J

11 AVILES STREET, APT 3C

SAINT AUGUSTINE, FL 32084 US

MGRM

08/30/2005