2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000010240

Entity Name
 TETH AVENUE INVESTORS, LLC



FILED
May 10, 2005 8:00 am
Secretary of State
04-18-2005 90073 023 ****50.00

| | | | | | | 7 | | | | | | |
|---|--|---|--|---------------------------------------|------------------------|--|---|-------------|-------------------------|--|----------------------------|------------------------|
| Principal Place of Business 1579 THE GREENS WAY SUITE #16 JACKSONVILLE BEACH, FL 32250 | | | Mailing Address 1579 THE GREENS WAY SUITE #16 JACKSONVILLE BEACH, FL 32250 | | | | | | | | | |
| 2. Principal Place of Business | | | 3. Mailing Address | | | - | | | | | | |
| Suite, Apt. #, etc. | | | Suite, Apt. #, etc. | | | | 04092005 | Chg-L | .t.C | CR2E08 | 13 (10/03) | |
| City & State | | | City & State | | | 4. FEI Numb | 574 | 1714 | | | oplied For | |
| Zip | Country | | Zip | Zip Coun | | 5. Certificate | | of Status (| Desired | | 5.00 Ad | ditional |
| | 6. Name | and Address of Current | egistered Agent Name | | | | 7. Name and Address of New Registered Agent | | | | | |
| SIMPSON 3500 S. 3F JACKSON | RD STREE | | - 1 | | ļ | et Address (P.O. Box Number is Not Acceptable) | | | | | | |
| | | | | | City | | ~ | | | E1 | Zip Cod | 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, typed | or printed name of registered agent a | nd Itie il applicable. (NOI | E: Pegisters | rd Agent signature red | puired v | when reinstating) | | | DATE | |] |
| | iling Fee i | | | | | | | | | ,check.pa Departme | | |
| 9. | | MANAGING MEMBE | | 10. | | | <u>-</u> | ADI | DITIONS/ | CHANGES | | |
| NAME STREET ADDRESS CITY-ST-ZIP | 1579 THE | ONATHAN D GREENS WAY, SUITE WILLE BEACH, FL 322 | | TITLE NAME: STREET ADDRESS CITY-ST-ZP | | | | | | | ☐ Change | ■ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | SUSAN C GREENS WAY, SUITE IVILLE BEACH, FL 322 | | | - | | | | | 1 | ☐ Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | | | | | Change | ☐ Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | - | | ☐ Delete | | i i | | | | | | ☐ Change | Addition . |
| title name street addréss city-st-zip | | | ☐ Delete | | - I | | | | | | ☐ Change | Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | ☐ Delete | | | | | | | - 1 | Change | Addition |
| indicated | on this reportion the second of the second o | rt is true and accurate and | this filing does not qualify to that my signature shall have empowered to execute this | the same | e legal effect as | if ma | ade under oath | that I am | Statutes. I a managi | further certifying member | y that the in or manage | atormation r of the |
| J. W. 1741 | SHOWATION A | NO THREE OF BRIDGE MAKE OF | PROMINE MANAGEMENT MEMBER IN | ***** | | | | | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | | I |