

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000018156

FILED
Jun 20, 2005
Secretary of State

Entity Name: ESPANOLA TIMBER COMPANY, LLC

Current Principal Place of Business:

900 S RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32114 US

New Principal Place of Business:

1410 LPGA BLVD.
SUITE 148
DAYTONA BEACH, FL 32117 US

Current Mailing Address:

900 S RIDGEWOOD AVENUE
DAYTONA BEACH, FL 32114 US

New Mailing Address:

1410 LPGA BLVD.
SUITE 148
DAYTONA BEACH, FL 32117 US

FEI Number: 20-0826130 **FEI Number Applied For** () **FEI Number Not Applicable** () **Certificate of Status Desired** (X)
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:

FRIEBIS, DANIEL S
3890 TURTLE CREEK DRIVE
SUITE B
PORT ORANGE, FL 32127 US

Name and Address of New Registered Agent:

BURROUGHS, HAROLD J
1410 LPGA BLVD.
SUITE 148
DAYTONA BEACH, FL 32117 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: HAROLD J. BURROUGHS

06/20/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: BURROUGHS, HAROLD J
Address: 1617 CRESCENT RIDGE ROAD
City-St-Zip: DAYTONA BEACH, FL 32118 US

ADDITIONS/CHANGES:

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: HAROLD J. BURROUGHS

MGR

06/20/2005

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