

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000019498

Entity Name: RIAC PROPERTIES, LLC

FILED  
Feb 21, 2005  
Secretary of State

## Current Principal Place of Business:

334 E. DUVAL STREET  
JACKSONVILLE, FL 32202

## New Principal Place of Business:

11636 CHARIOT LANE  
JACKSONVILLE, FL 32223

## Current Mailing Address:

P.O. BOX 57606  
JACKSONVILLE, FL 322417606

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARKER, EARL M JR  
334 E. DUVAL STREET  
JACKSONVILLE, FL 32202 US

## Name and Address of New Registered Agent:

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/MEMBERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: CYWES, ROBERT  
Address: 11636 CHARIOT LANE  
City-St-Zip: JACKSONVILLE, FL 32223

Title: MGRM ( ) Change (X) Addition  
Name: WOLFE, IRENE L  
Address: 11636 CHARIOT LANE  
City-St-Zip: JACKSONVILLE, FL 32223

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: IRENE L. WOLFE

MM

02/21/2005

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