2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021983

P.O. BOX 1332

NICEVILLE, FL 32588 US

Address:

City-St-Zip:

Entity Name: WILCAR PROPERTIES LLC

FILED May 03, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 195 J CUTTS DRIVE VALPARAISO, FL 32580 US **Current Mailing Address: New Mailing Address:** P.O. BOX 1332 NICEVILLE, FL 32588 US FEI Number: 36-4551320 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: Name and Address of New Registered Agent: WILLINGHAM, MATTHEW J 195 J CUTTS DRIVE VALPARAISO, FL 32580 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/MEMBERS: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition WILLINGHAM, MATTHEW J Name: Name: Address: P,O, BOX 1332 Address: City-St-Zip: NICEVILLE, FL 32588 US City-St-Zip: Title: MGRM () Delete Title: MGRM (X) Change () Addition CARPENTER, GARY Name: Name: CARPENTER, GARY Address: 844 MEADOW LANE Address: 1581 PINE STREET City-St-Zip: FORT WALTON BEACH, FL 32547 US City-St-Zip: NICEVILLE, FL 32578 US Title: MEM () Delete Title: MEM (X) Change () Addition CARPENTER, BETTY R CARPENTER, BETTY R Name: Name: Address: 844 MEADOW LANE Address: 1581 PINE STREET City-St-Zip: FORT WALTON BEACH, FL 32547 US City-St-Zip: NICEVILLE, FL 32578 US Title: MEM () Delete Title: () Change () Addition Name: WILLINGHAM, MICHELE D Name:

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.

Address:

City-St-Zip:

SIGNATURE: MATTHEW J. WILLINGHAM MGRM 05/03/2005