

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000032687

FILED
Jun 30, 2005
Secretary of State

Entity Name: OLD TRAIL PARTNERS, LLC

Current Principal Place of Business:

455 TWIN LAKES DRIVE, SUITE 100
OAKLAND, MI 48363

New Principal Place of Business:

30959 SUTTERS HILL CT.
FARMINGTON HILLS, MI 48331

Current Mailing Address:

455 TWIN LAKES DRIVE, SUITE 100
OAKLAND, MI 48363

New Mailing Address:

30959 SUTTERS HILL CT.
FARMINGTON HILLS, MI 48331

FEI Number: 20-1079233 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:

MOODY, JONES & MONTEFUSCO, P.A.
1333 S. UNIVERSITY DRIVE, SUITE 201
PLANTATON, FL 33324 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/MANAGERS:

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

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

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: GRIFFITH, GARY L MR.
Address: 30959 SUTTERS HILL CT.
City-St-Zip: FARMINGTON HILLS, MI 48331 US

Title: MGR () Change (X) Addition
Name: TATA, FRANK L MR.
Address: 37480 WHITNEY KNOLL
City-St-Zip: WAYNE, MI 48184 US

Title: MGR () Change (X) Addition
Name: COTTONE, SALVATORE MR.
Address: 455 TWIN LAKES DR. SUITE 100
City-St-Zip: OAKLAND, MI 48363 US

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: GARY L. GRIFFITH

MGRM

06/30/2005

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