

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000035450

Entity Name: FBC PROPERTIES LLC

FILED  
Jan 10, 2005  
Secretary of State

**Current Principal Place of Business:**

2251 TEEL DRIVE  
VIENNA, VA 22182 US

**New Principal Place of Business:**

**Current Mailing Address:**

2251 TEEL DRIVE  
VIENNA, VA 22182 US

**New Mailing Address:**

FEI Number: 03-0541593

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CIOTA, GERALD L  
192 BAY TREE DRIVE  
DESTIN, FL 32550 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: MGRM ( ) Delete  
Name: CIOTA, ANDREA L  
Address: 2251 TEEL DRIVE  
City-St-Zip: VIENNA, VA 22182 US

Title: MGRM ( ) Delete  
Name: BRANCH, DEBORAH A  
Address: 1000 STEEPLE COURT  
City-St-Zip: FALLS CHURCH, VA 22046 VA

Title: MGRM ( ) Delete  
Name: FAIN, WILLIAM T  
Address: 9112 CASTLE PINES CIRCLE  
City-St-Zip: MONTGOMERY, AL 36117

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANDREA L. CIOTA

MGRM

01/10/2005

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