2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036562

Entity Name: REDFISH CONDOS TRUST, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
56 SPIRES LANE SUITE 12A SANTA ROSA BEACH, FL 32459	4399 COMMONS DRIVE SUITE 200 DESTIN, FL 32541

Current Mailing Address:	**New Mailing Address:**
56 SPIRES LANE SUITE 12A SANTA ROSA BEACH, FL 32459	4399 COMMONS DRIVE SUITE 200 DESTIN, FL 32541

FEI Number: 20-1117900   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
COFFIELD, P. COLLEEN 1719 S. COUNTY HWY 393 SANTA ROSA BEACH, FL 32459 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:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	MCCORMICK, MICHAEL	Name:	MCCORMICK, MICHAEL
Address:	56 SPIRES LANE	Address:	4399 COMMONS DRIVE, SUITE 200
City-St-Zip:	SANTA ROSA BEACH, FL 32459	City-St-Zip:	DESTIN, FL 32541
Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	MCCORMICK, ASHLEY	Name:	MCCORMICK, ASHLEY
Address:	56 SPIRES LANE	Address:	4399 COMMONS DRIVE, SUITE 200
City-St-Zip:	SANTA ROSA BEACH, FL 32459	City-St-Zip:	DESTIN, FL 32541

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: MICHAEL W. MCCORMICK   MGRM   04/29/2005

_____Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date_____