2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000038786

Entity Name: TROUT RIVER PARTNERS, LLC

FILED Apr 27, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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9995 GATE PARKWAY N. SUITE 250

JACKSONVILLE, FL 32246 US

Current Mailing Address: New Mailing Address:

9995 GATE PARKWAY N. SUITE 250

JACKSONVILLE, FL 32246 US

FEI Number: 20-1155258 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

INTREPID REGISTERED AGENT SERVICES, LLC 225 WATER STREET

2020 JACKSONVILLE, FL 32202 US

City-St-Zip:

INTREPID REGISTERED AGENT SERVICES, LLC ONE INDEPENDENT DRIVE SUITE 1200 JACKSONVILLE, FL 32202 US

JACKSONVILLE, FL 32246 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: GWEN HUTCHESON GRIGGS, EVP 04/27/2005

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

() Delete Title: () Change (X) Addition MCGRIFF IV, WILLIAM A Name: Name: Address: Address: 9995 GATE PARKWAY N., SUITE 250 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246 US () Change (X) Addition Title: Title: MGRM () Delete Name: Name: MCAFEE, MICHAEL Address: Address: 9995 GATE PARKWAY N., SUITE 250 City-St-Zip: City-St-Zip: JACKSONVILLE, FL 32246 US Title: () Delete Title: MGRM () Change (X) Addition SURFACE, DAVID Name: Name: 9995 GATE PARKWAY N., SUITE 250 Address: Address:

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.

City-St-Zip:

SIGNATURE: DAVID SURFACE MGRM 04/27/2005