

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056739

Entity Name: NOBLE WARRANTY, L.L.C.

FILED
Mar 17, 2005
Secretary of State

Current Principal Place of Business:

6 FLORIDA PARK DRIVE, SUITE C
PALM COAST, FL 32137

New Principal Place of Business:

10 FLORIDA PARK DRIVE, SUITE C
PALM COAST, FL 32137

Current Mailing Address:

P.O. BOX 352109
PALM COAST, FL 321352109

New Mailing Address:

P.O. BOX 354119
PALM COAST, FL 321352109

FEI Number: 20-1505655

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONNER, TIMOTHY J ATTY.
2 JUNGLE HUT ROAD, STE. 1
PALM COAST ROAD, STE. 1, FL 32137 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: LAHIRI, ROBIN
Address: P.O. BOX 352109
City-St-Zip: PLAM COAST, FL 321352109

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LAHIRI, ROBIN
Address: P.O. BOX 354119
City-St-Zip: PLAM COAST, FL 321352109

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: ROBIN LAHIRI

MGRM

03/17/2005

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