## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

## FILED May 02, 2005 8:00 am Secretary of State

Daytime Phone #

DOCUMENT # L04000056796  1. Entity Name FIVE FORTY TWO, LLC								05-02-200	)5 90375	019 ****5:	5.00
Principal Place of Business 1000 SOUTHERN BOULEVARD, SUITE 300 WEST PALM BEACH, FL 33405			Mailing Address 1000 SOUTHERN BOU WEST PALM BEACH, FL	Mailing Address 1000 SOUTHERN BOULEVARD, SUITE 300 WEST PALM BEACH, FL 33405					:		
2. Principal Place of Business			3. Mailing Address	3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			04262005	Chg-LLC	CR2E	E083 (10/03)	
City & State			City & State	City & State			4. FEI Numb			<del></del>	oplied For ot Applicable
Zip	•	Country	Zip	Coun	try		5. Certificate	of Status Desired	M	\$5.00 Add Fee Require	
	6. Name	e and Address of Cui	rrent Registered Agent		Name		7. Name and	d Address of Nev	v Registered	d Agent	····
505 SOUTI	H FLAGL	ERVICE, LLC ER DRIVE, SUIT H, FL 33401	E 1100				ss (P.O. Box Number is Not Acceptable)				
~ .					City		······································		F	Zip Cod	e
8. The above the obligati	named enti	ty submits this statem stered agent.	ent for the purpose of changing its	registere	ed office or r	egistere	ed agent, or bo	oth, in the State of	Florida. I ar	n familiar with,	and accept
SIGNATURE .	Signature, type	d or printed name of registered	agent and title if applicable. (NOT	E: Registere	d Agent signature	e required v	when reinstating)		DATE		
		is \$50.00 by 1, 2005					Make check payable to Florida Department of State				
9.		MANAGING MI	EMBERS/MANAGERS	10.				ADDITION	NS/CHANGE	S	·
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Deliete			100	NSPORTA O SOUTH	TION SERV ERN BLVD.	SUIT	E 300	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete			WES	I FALM	BEACH, FL	- 3341	05 ☐ Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	٠.		_ Delete							☐ Change	Addition
indicated	on this repo	ort is true and accurate	d with this filing does not qualify to e and that my signature shall have rustee empowered to execute this	the same	e legal effect	t as if m	ade under oat	h; that I am a ma	es. I further c naging mem	ertify that the interest or manage	nformation er of the