

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056942

FILED
Jan 04, 2005
Secretary of State

Entity Name: WHITEAKER & PARSON PROPERTY INVESTMENTS, L.L.C.

Current Principal Place of Business:

11454 28TH STREET CIRCLE EAST
PARRISH, FL 34219

New Principal Place of Business:

923 4TH ST. WEST
PALMETTO, FL 34221

Current Mailing Address:

11454 28TH STREET CIRCLE EAST
PARRISH, FL 34219

New Mailing Address:

923 4TH ST. WEST
PALMETTO, FL 34221

FEI Number: 73-1716338

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARSON, TEDDY SHANE
11454 28TH STREET CIRCLE EAST
PARRISH, FL 34219 US

Name and Address of New Registered Agent:

PARSON, TEDDY SHANE
923 4TH ST. WEST
PALMETTO, FL 34221 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:

01/04/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PARSON, TEDDY SHANE
Address: 11454 28TH STREET CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

Title: MGR () Delete
Name: WHITEAKER, CHARLES E
Address: 11454 28TH STREET CIRCLE EAST
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: PARSON, TEDDY SHANE
Address: 923 4TH ST. WEST
City-St-Zip: PALMETTO, FL 34221

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: CHARLES E. WHITEAKER

MGR.

01/04/2005

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