

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070786

Entity Name: LM DELPRADO LLC

FILED  
Jan 12, 2005  
Secretary of State

## Current Principal Place of Business:

4226 DEL PRADO BLVD.  
CAPE CORAL, FL 33904

## New Principal Place of Business:

## Current Mailing Address:

109 W. PAGO PAGO DR.  
ATTN: KENT HENDRICK  
NAPLES, FL 34113

## New Mailing Address:

109 W. PAGO PAGO DR.  
ATTN: KENT HEDRICK  
NAPLES, FL 34113

FEI Number: 11-3728063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HEDRICK, KENT G  
109 W. PAGO PAGO DR.  
NAPLES, FL 34113 US

## Name and Address of New Registered Agent:

HEDRICK, KENT G  
109 W. PAGO PAGO DR.  
NAPLES, FL 34113 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: KENT G. HEDRICK

01/12/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: HEDRICK, KENT G  
Address: 109 W. PAGO PAGO DR.  
City-St-Zip: NAPLES, FL 34113

Title: MGRM ( ) Delete  
Name: HEDRICK, MARJA  
Address: 109 W. PAGO PAGO DR.  
City-St-Zip: NAPLES, FL 34113

Title: MGRM ( ) Delete  
Name: ARNOLD, JOHN P  
Address: 999 CAXAMBAS DR.  
City-St-Zip: MARCO ISLAND, FL 34145

Title: MGRM ( ) Delete  
Name: WASHBURN, LYNNE  
Address: 999 CAXABAS DR.  
City-St-Zip: MARCO ISLAND, FL 34145

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HEDRICK, KENT G  
Address: 109 W. PAGO PAGO DR.  
City-St-Zip: NAPLES, FL 34113

Title: MGRM (X) Change ( ) Addition  
Name: HEDRICK, MARJA  
Address: 109 W. PAGO PAGO DR.  
City-St-Zip: NAPLES, FL 34113

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: WASHBURN, LYNNE  
Address: 999 CAXAMBAS DR.  
City-St-Zip: MARCO ISLAND, FL 34145

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: KENT G. HEDRICK

MGRM

01/12/2005

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