2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED **DOCUMENT # L04000078642** 1. Entity Name 2005 APR 18 PM 1: 15 DREW PASTURES, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 7208 SAND LAKE ROAD, SUITE 300 7208 SAND LAKE ROAD, SUITE 300 ORLANDO, FL 32819 ORLANDO, FL 32819 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 01132005 CR2E083 (10/03) Cha-LLC Applied For City & State City & State 4. FEI Number Not Applicable Country Zio Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HARDING, ROBERT L ESQ. Street Address (P.O. Box Number is Not Acceptable) 20 NORTH EOLA DRIVE ORLANDO, FL 32801 City Zip Code of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept 8. The above named entity submits this statement for the the obligations of registere atgent (NOTE: Registered Agent signature required when reinstating) Make check payable to Filing Fee Is \$50.00 Due by May 1, 2005 Florida Department of State ADDITIONS/CHANGES 9. MANAGING MEMBERS/MANAGERS 10. ☐ Addition MGR ☐ Delete TITLE ☐ Change TITLE DINKEL, MICHAEL NAME NAME 7208 SAND LAKE ROAD, SUITE 300 STREET ADDRESS 700047152347 STREET ADDRESS 02/23/05--01049--001 ORLANDO, FL 32819 **300.00 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME NAME SZERGINA TERRITO STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITI F TITLE ☐ Defete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE Change Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET CORE CITY-ST-ZIP CITY/ST-ZIP hereby/certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is frue and accurate and that my 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 of the receiver or trusted empowered to execute this report as required by Chapter 608, Florida Statutes.