

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000080457

FILED
Jun 28, 2005
Secretary of State

Entity Name: OLD FASHIONED HOLDINGS, LLC

Current Principal Place of Business:

103 WEST MERIDIAN STREET
TALLAHASSEE, FL 32301

New Principal Place of Business:

515 EAST PARK AVENUE
TALLAHASSEE, FL 32301

Current Mailing Address:

103 WEST MERIDIAN STREET
TALLAHASSEE, FL 32301

New Mailing Address:

ONE SOUTHEAST THIRD AVENUE
SUITE 1940
MIAMI, FL 33131

FEI Number: 34-2028187 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CORPDIRECT AGENTS, INC.
103 N. MERIDIAN STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301 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: ED LARY

06/28/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: VAUGHN, MARGARET
Address: 103 WEST MERIDIAN STREET
City-St-Zip: TALLAHASSEE, FL 32301

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VAUGHN, MARGARET
Address: ONE SOUTHEAST THIRD AVENUE, #1940
City-St-Zip: MIAMI, FL 33131

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: MARGARET VAUGHN

MGR

06/28/2005

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