

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000083786

FILED
Jul 19, 2005
Secretary of State

Entity Name: TOMOKA EYE PROPERTIES NORTH, LLC

Current Principal Place of Business:

802 STERTHAUS AVENUE
SUITE C
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

802 STERTHAUS AVENUE
SUITE C
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

BURNETT, RANDOM R
501 N. GRANDVIEW AVENUE
3RD FLOOR EAST
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

MAKOWSKI, SANDI W
527 N. BEACH STREET
ORMOND BEACH, FL 32174 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: SANDI MAKOWSKI

07/19/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MAKOWSKI, MICHAEL K
Address: 802 STERTHAUS AVENUE, SUITE C
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Delete
Name: SPERTUS, ALAN D
Address: 802 STERTHAUS AVENUE, SUITE C
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Delete
Name: KENNEDY, MARK
Address: 802 STERTHAUS AVENUE, SUITE C
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGRM () Delete
Name: TEN HULSEN, RICHARD D
Address: 802 STERTHAUS AVENUE, SUITE C
City-St-Zip: ORMOND BEACH, FL 32174 US

ADDITIONS/CHANGES:

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

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

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

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: MICHAEL K. MAKOWSKI

MGRM

07/19/2005

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