

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084478

FILED
Feb 09, 2005
Secretary of State

Entity Name: ILS AT PARK TOWERS, LLC

Current Principal Place of Business:

701 WATERFORD WAY, SUITE 780
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

701 WATERFORD WAY, SUITE 780
MIAMI, FL 33126

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CFRA, LLC
CORPORATE CENTER THREE AT INTERNATIONAL PLAZA
4221 W. BOY SCOUT BOULEVARD, 10TH FLOOR
TAMPA, FL 336075736 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: PLANA, NESTOR
Address: 701 WATERFORD WAY, SUITE 780
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: NOONAN, RAY
Address: 701 WATERFORD WAY, SUITE 780
City-St-Zip: MIAMI, FL 33126

Title: MGR () Delete
Name: CHUNN, PATRICK
Address: 701 WATERFORD WAY, SUITE 780
City-St-Zip: MIAMI, FL 33126

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:

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: PATRICK CHUNN

MGR

02/09/2005

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