

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000086766

FILED
Mar 08, 2005
Secretary of State

Entity Name: COPPOLA PROPERTIES LLC

Current Principal Place of Business:

855 SOUTH FEDERAL HIGHWAY, UNIT 116
BOCA RATON, FL 33432

New Principal Place of Business:

855 SOUTH FEDERAL HIGHWAY, SUITE#116
BOCA RATON, FL 33432

Current Mailing Address:

855 SOUTH FEDERAL HIGHWAY, UNIT 116
BOCA RATON, FL 33432

New Mailing Address:

855 SOUTH FEDERAL HIGHWAY, SUITE# 116
BOCA RATON, FL 33432

FEI Number: 20-2454131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: COPPOLA, JAMES
Address: 855 SOUTH FEDERAL HIGHWAY, UNIT 116
City-St-Zip: BOCA RATON, FL 33432

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: COPPOLA, JAMES PRES.
Address: 855 SOUTH FEDERAL HIGHWAY, SUITE# 116
City-St-Zip: BOCA RATON, FL 33432 US

Title: MGR () Change (X) Addition
Name: COPPOLA, GEORGE V.P.
Address: 6450 VIA TIERRA DRIVE
City-St-Zip: BOCA RATON, FL 33433 US

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: GEORGE COPPOLA

VP

03/08/2005

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