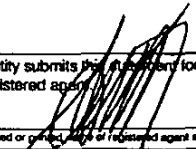
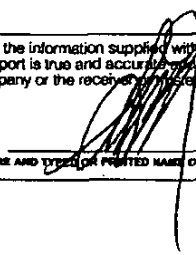


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

04-21-2008 90318 027 ***138.75

DOCUMENT # L07000082759			
1. Entity Name FIVE PARCELS-60, LLC			
Principal Place of Business 1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401		Mailing Address 1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401	
2. Principal Place of Business - No P.O. Box # 4650 Donald Ross Rd		3. Mailing Address 4650 Donald Ross Rd	
Suite, Apt. #, etc. Suite 200		Suite, Apt. #, etc. Suite 200	
City & State Palm Beach Gardens, FL		City & State Palm Beach Gardens, FL	
Zip 33418	Country	Zip 33418	Country
4. FEI Number 26-0717670		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BROCK, PETER 1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401		7. Name and Address of New Registered Agent Name Brock, Peter Street Address (P.O. Box Number is Not Acceptable) 4650 Donald Ross Rd, Suite 200 City Palm Beach Gardens FL Zip Code 33418	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE:  (NOTE: Registered Agent signature required when renewing) DATE: _____			
FILE NOW!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BROCK, PETER 1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Brock, Peter 4650 Donald Ross Rd, Suite 200 Palm Beach Gardens, FL 33418 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BROCK, ANDREW 1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Brock, Andrew 4650 Donald Ross Rd., Suite 200 Palm Beach Gardens, FL 33418 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true 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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE:  (NOTE: Registered Agent signature required when renewing) DATE: _____ Daytime Phone # _____			