2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 19, 2005 08:00 AM
Secretary of State

DOCUMENT # L95000000 1. Entity Name TAMIAMI INVESTORS, L.C.	629			
Principal Place of Business 7575 PELICAN BAY BLVD #1001 MONTENERO NAPLES, FL 34108	Mailing Address 7575 PELICAN BAY BLVD #10 NAPLES, FL 34108	001 MONTENERO		



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03182005 No Chg-LLC CR2E083 (10/03)

4. FEI Number	Applied For
57-1032919	 Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

BAILY, JAY E ESQUIRE
BAILY & BREWER
46 NORTH WASHINGTON BLVD., SUITE 13
SARASOTA, FL 34236

DO NOT WRITE
IN THIS SPACE

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

SIGNATURE.	Signature, typed or profed name of registered agent and little if applicable.	(NOTE Registered Agent signature required when reinstating)	DATE		
Fi D	iling Fee is \$5 0.00 ue by May 1, 2005				
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BOONE, G. LEN 7575 PELICAN BAY BLVD #1001 MONTENERO NAPLES, FL 34108		U00000316864 04/19/05-80090-003 300.00		
TITLE NAME STREET ADDRESS CITY-SY-ZIP TITLE			NOT WRITE		

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and acquirete and that my signature shall have the same legal effect as it made under oath, that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TOTLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SIGNATURE AND DATED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/10/05

239-592 -9527

Daytims Phone #