2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 13, 2005
Secretary of State

DOCUMENT# L97000000248

Entity Name: MATHEWS WINTER HAVEN INVESTMENTS, L.C.

Current Principal Place of Business:

3843 W LAKE HAMILTON DR
WINTER HAVEN, FL 338818223

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 438
HAINES CITY, FL 338450438

New Mailing Address:

FEI Number: 59-3500715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **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:

MATTHEWS, EDWARD D TRUSTEE
GRANTOR RETAINED ANNUITY TRUST
30 CLUB CT
HAINES CITY, FL 33844 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:	MGRM	( ) Delete
Name:	MATHEW, EDWARD D TRUSTEE	
Address:	30 CLUB CT	
City-St-Zip:	HAINES CITY, FL 33844	
Title:	MGRM	( ) Delete
Name:	MATHEWS, CHARLES A TRUSTEE	
Address:	30 CLUB CT	
City-St-Zip:	HAINES CITY, FL 33844	

ADDITIONS/CHANGES:

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: CHARLES A. MATHEWS MGRM 05/13/2005

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