

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L97000001280

FILED
Jan 05, 2005
Secretary of State

Entity Name: IMPROVISATION PROPERTIES, L.L.C.

Current Principal Place of Business:

87 MEIGS DRIVE
SHALIMAR, FL 32579

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1263
SHALIMAR, FL 32579

New Mailing Address:

FEI Number: 59-3479087

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JINKS, JOHN B JR.
87 MEIGS DR.
SHALIMAR, FL 32579 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: JINKS, JOHN B JR
Address: P.O. BOX 1263 N/A
City-St-Zip: SHALIMAR, FL 32579

Title: MGRM () Delete
Name: MCCAIN, ELEANORE A
Address: P.O. BOX 1263 N/A
City-St-Zip: SHALIMAR, FL 32579

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: JOHN B. JINKS, JR.

MGRM

01/05/2005

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