

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 17, 2005 08:00 AM
Secretary of State

DOCUMENT # L98000000092 1. Entity Name LBP PROPERTIES (FLORIDA) L.C.	
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Principal Place of Business 2105 BARRETT PARK DRIVE SUITE 101 KENNESAW, GA 30144	Mailing Address 2105 BARRETT PARK DRIVE SUITE 101 KENNESAW, GA 30144
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DO NOT WRITE IN THIS SPACE



01052005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-2368558	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

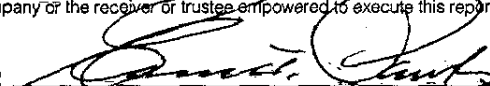
**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM POULOS, GEORGE 3004 GOLF CREST LANE WOODSTOCK, GA 30189
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MOGAVERO, MICHAEL S 28 MALLARD ROAD FLOWER HILL, NY 11050
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02/17/05-80064-001 55.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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:  **2-15-05** **770-421-2950**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #