## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## May 09, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # L98000000761 MARKS DIVERSIFIED HOLDINGS, L.C. Principal Place of Business \_\_ Mailing Address 120 E. MAIN ST. 120 E. MAIN ST. SUITE A SUITE A PENSACOLA, FL 32501 PENSACOLA, FL 32501 05042005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FFI Number 59-3519197 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PANYKO, JOHN A DO NOT WRITE 200 SOUTH TARRAGONA STREET PENSACOLA, FL 32501 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstalling) Filing Fee is \$50.00 Due by September 7, 2005 MÄNAGING MEMBERS/MANAGERS 9. TITLE MGR NASH, NEAL B NAME STREET ADDRESS 120 E. ST. SUITE A CITY-ST-ZIP PENSACOLA, FL 32501 TITLE NAME MARKS, JAMES J JR. U00000364577 05/09/05-80001-017 50.00 STREET ADDRESS 120 E. MAIN ST. SUITE A CITY-ST-ZIP PENSACOLA, FL 32501 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLF IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

11. I hereby certify that the information supplied with this filling 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 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 by the receiver or trustee embowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: NEAL NASH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

7-2-6

9570-5629-865c

Daytime Phone A

FILED