



# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90048 001 \*\*\*850.00

<b>DOCUMENT # L98000001541</b> 1. Entity Name <b>PRESTWICK MANAGEMENT, L.L.C.</b>					
Principal Place of Business <b>2359 BEVILLE ROAD DAYTONA BEACH, FL 32119</b>			Mailing Address <b>2359 BEVILLE ROAD DAYTONA BEACH, FL 32119</b>		
2. Principal Place of Business <b>2379 Beville Road</b> Suite, Apt. #, etc.		3. Mailing Address <b>2379 Beville Road</b> Suite, Apt. #, etc.			
City & State <b>Daytona Beach, Florida</b>		City & State <b>Daytona Beach, Florida</b>		4. FEI Number <b>59-3531510</b>	
Zip Country <b>32119 USA</b>		Zip Country <b>32119 USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>HOSSEINI-KARGAR, MORTEZA 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <b>2379 Beville Road</b> City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>		<b>Make check payable to Florida Department of State</b>			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>MGRM PRESTWICK AT PLANTATION BAY 2359 BEVILLE ROAD DAYTONA BEACH, FL 32119</b>	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<b>2379 Beville Road</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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.					
By: <b>Prestwick at Plantation Bay, a Fla. General Partnership</b> By: <b>MHK of Volusia County, Inc., its Managing Partner</b>					
<b>SIGNATURE: Cynthia C. Jones, President</b> <span style="float: right;">4/11/05 386-788-0820</span>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					