2005 LIMITED LIABILITY COMPANY

ANNUAL REPORT

DOCUMENT # L98000003399 1. Entity Name

Mailing Address

Principal Place of Business 132 ROYAL PALM WAY PALM BEACH, FL 33480

MANDALAY POINT, LLC

132 ROYAL PALM WAY PALM BEACH, FL 33480

FILED Jan 31, 2005 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01192005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 52-2136489

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

PICKERING, KIMBERLY 132 ROYAL PALM WAY PALM BEACH, FL 33480

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

| | named entity submits this statement for the purpose of changitions of registered agent. | ling its registered office or registered agent, or both, in t | he State of Florida. I am familiar with, and accept |
|--|---|--|---|
| SIGNATURE. | Signature, typed or printed name of registered agent and title if applicable | (NOTE Registered Agent signature required when reinstating) | DATE |
| Fi | iling Fee is \$50.00 ue by May 1, 2005 | (In the line of th | E |
| 9. TITLE NAME STREET ADDRESS CITY-ST-ZIP | MANAGING MEMBERS/MANAGERS MGRM UNITED STATES TRUST COMPANY OF FLORIDA 132 ROYAL PALM WAY PALM BEACH, FL 33480 | Ú, | Un0000207029 2/01/05-80028-020 50.00 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | |
| TITLE NAME STREET ADDRESS CITY+ST-ZIP | | | OT WRITE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | IN TH | IS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | _ |
| TITLE NAME | | | |

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.