


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90119 039 ****55.00

DOCUMENT # L99000001505 1. Entity Name HARCLAND HOLDING GP LLC	
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Principal Place of Business C/O GOODMAN PROPERTIES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 1101E WEST PALM BEACH, FL 33401	Mailing Address C/O GOODMAN PROPERTIES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 1101E WEST PALM BEACH, FL 33401
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20053062



04142005No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent SHEWALTER, WILLIAM C/O GOODMAN PROPERTIES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 1104 WEST PALM BEACH, FL 33401

**DO NOT WRITE
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 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	MGR GOODMAN PROPERTIES, INC. 777 SOUTH FLAGLER DRIVE, SUITE 1104 WEST PALM BEACH, FL 33401
TITLE NAME STREET ADDRESS CITY - ST - ZIP	M GOODMAN, MURRAY H 777 SOUTH FLAGLER DRIVE, SUITE 1101E WEST PALM BEACH, FL 33401
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**DO NOT WRITE
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: *William A. Shewalter* Goodman Properties Inc., manager

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

4/30/05 561-833-3777
Date Daytime Phone #

William A. Shewalter, Vice President