2005 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

Jan 14, 2005 08:00 AM Secretary of State DOCUMENT # M00000001674 BRADENTON BEACH DEVLEOPMENT, LLC Principal Place of Business _ Mailing Address C/O WILLIAM R. SEPE C/O WILLIAM R. SEPE 903 CENTRAL AVENUE 903 CENTRAL AVENUE SPRING LAKE HEIGHTS, NJ 07762 SPRING LAKE HEIGHTS, NJ 07762 01052005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 84-1554817 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent SEPE, WILLIAM DO NOT WRITE TENNIS VILLAS #3213 SOUTH SEAS RESORT CAPTIVA ISLAND, FL 33924 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, 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 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE NAME SEPE, WILLIAM STREET ADDRESS 903 CENTRAL AVENUE U00000181529 SPRING LAKE HEIGHTS, NJ 07762 CITY-ST-ZIP Ú1/18/05-80001-014 SS.AA TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP

FILED

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.

William SEPE 1-5-05 7.32-223-6/14 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANABING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #