

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000002421

FILED
Apr 27, 2005
Secretary of State

Entity Name: FOX POINTE PROPERTIES, LTD. CO.

Current Principal Place of Business:

10910 S.W. 58TH AVE RD
OCALA, FL 34476

New Principal Place of Business:

5745 S. W. 43RD ST RD.
OCALA, FL 34474

Current Mailing Address:

10910 S.W. 58TH AVE RD
OCALA, FL 34476

New Mailing Address:

5745 S.W. 43RD ST RD
OCALA, FL 34474

FEI Number: 34-1959447

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MACKAY, DAVID L
2801 SOUTHWEST COLLEGE ROAD, SUITE #9
OCALA, FL 34474 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ONORATO, RICHARD
Address: 10910 S.W. 58 TH AVE RD
City-St-Zip: OCALA, FL 34476

Title: MGRM () Delete
Name: LAWROSKI, GREG
Address: 10910 S.W. 58 TH AVE RD
City-St-Zip: OCALA, FL 34476

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ONORATO, RICHARD
Address: 5745 S.W. 43RD ST RD
City-St-Zip: OCALA, FL 34474

Title: MGRM (X) Change () Addition
Name: LAWROSKI, GREG
Address: 5745 S.W. 43 TH AVE RD
City-St-Zip: OCALA, FL 34474

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: GREG LAWROSKI

MGR

04/27/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date