## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M01000002616

Name:

Address:

City-St-Zip:

4425 RANDOLPH RD., STE. 204

CHARLOTTE, NC 28211

Entity Name: POPLAR ASSOCIATES, LLC

**FILED** May 03, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 4517 RANDOLPH RD. CHARLOTTE, NC 28211 **Current Mailing Address: New Mailing Address:** 4517 RANDOLPH RD. CHARLOTTE, NC 28211 FEI Number: 56-2054687 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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: ADDITIONS/CHANGES: Title: () Change () Addition MGR () Delete LUSKI, ABRAHAM Name: Name: Address: 2509 GIVERNY DR. Address: City-St-Zip: CHARLOTTE, NC 26226 City-St-Zip: Title: MGR Title: () Delete () Change () Addition Name: LUSKI, ISAAC Name: Address: 3239 FOXCROFT RD. Address: City-St-Zip: CHARLOTTE, NC 28211 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change ( ) Addition GORELICK, SHELTON Name: GORELICK, SHELTON Name: 6060 JA JONES DR., STE. 516 6000 FAIRVIEW RD., STE. 1415 Address: Address: City-St-Zip: CHARLOTTE, NC 28287 City-St-Zip: CHARLOTTE, NC 28210 Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition GORELICK, WILLIAM GORELICK, WILLIAM

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.

Name:

Address:

City-St-Zip:

4064 COLONY ROAD

CHARLOTTE, NC 28211

SIGNATURE: ABRAHAM LUSKI 05/03/2005