2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

1. Entity Nan HEAD (P	MENT # M02000002864 ne 'BC). LLC ce of Business LMeiling Address WIC HIGHWAY 98 R, AL 36564 POINT CLEAR, AL 36564		Secretary of State
DO NOT WRITE IN THIS SPACE			08112005 No Chg-LLC
226 PALA NINTH FL	Name and Address of Current Registered Agent TEPHEN B FOX PLACE OOR, SEVILLE TOWER DLA, FL 32501		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 typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE Filling Fee is \$50.00 Due by September 7, 2005			
9.	MANAGING MEMBERS/MANAGERS		The state of the s
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGR HEAD, DAVID H 18300 SCENIC HIGHWAY 98 POINT CLEAR, AL 36564		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			08/19/05-800U2-010 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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 ply 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 purrustee empowered to execute this report as required by Chapter 608, Florida Statutes.			
SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Da			