## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 16, 2005 08:00 AM Secretary of State

DOCUMENT # M0200003403  1. Entity Name REGIS REALTY I LLC			Secretary of State
, , ,	te of Business Mailing Address LIC DR., STE. 490 555 REPUBLIC DR., STE. 490 75074 PLANO, TX 75074		
D	OO NOT WRITE IN THIS SPA	CE	04072005 No Chg-LLC CR2E083 (10/03)  4. FEI Number 47-0884340 Applied For Not Applied For Reference  5. Certificate of Status Desired □ Fee Required
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		September 1991 (1997) and the septem	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 bits if applicable  (NOTE Registered Agent signature required when reinstating)  DATE  Filling Fee is \$50.00  Due by May 1, 2005			
9.	MÁNÁĞINĞ MEMBERS/MANAGERS		The same of the sa
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AKIN, RONALD F 1750 VALLEY VIEW LANE DALLAS, TX 75234		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			<del></del>
TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE NAME		And all	DO NOT WRITE IN THIS SPACE
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			The second of th
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		arr ir—— alkalanna — — a	www.dadf-ne-daddddd-g-rendd-g-rendd-dae.
11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 cath; that I am a managing member or manager of the limited liability company or the regeiver or justee empowered to execute this report as required by Chapter 608, Florida Statutes.			

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

SIGNATURE:

SIGNATUR