`2005 LIMITED LIABILITY COMPANY

FILED Feb 22, 2005 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # M03000001026** 1. Entity Name PRENTISS POINTE, LTD. CO. Principal Place of Business Mailing Address 7000 QUAIL LAKES DRIVE 7000 QUAIL LAKES DRIVE HOLLAND, OH 43528 HOLLAND, OH 43528 01252005No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 36-4519955 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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. 1 am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and fille if applicable (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE HOWE, GARY L NAME 7000 QUAIL LAKES DRIVE STREET ADDRESS HOLLAND, OH 43528 CITY-ST-ZIP 3808239082 TP/22/05-80028-014 50.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP BILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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 goceiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: 3 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

NAME STREET ADDRESS CITY-ST-ZIP