2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Jul 13, 2005 08:00 AM DOCUMENT # M03000003242 Secretary of State 1. Entity Name GRG PROPERTIES, LLC Principal Place of Business Mailing Address 715 E. MAIN ST. 715 E. MAIN ST. COLQUITT, GA 39837 COLQUITT, GA 39837 07102005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0207557 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE Filing Fee is \$50.00 Due by September 7, 2005 MANAGING MEMBERS/MANAGERS 9. MGR TITLE GARLAND, GERALD R NAME P.O. BOX 125 STREET ADDRESS CITY-ST-ZIP COLQUITT, GA 39837 U00000372620 07/13/05-80010-004 50.00 TITLE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE ms NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CATY-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 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: XXX

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

7-10-05

(229) 758-3303

FILED

Daytime