2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000003507

Entity Name: PROCACCI 5082, LLC

FILED May 04, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ONE WACHOVIA CENTER 5082 COCONUT CREEK PARKWAY

301 SOUTH COLLEGE STREET MARGATE, FL 33063 CHARLOTTE, NC 28288

Current Mailing Address: New Mailing Address:

ONE WACHOVIA CENTER 5082 COCONUT CREEK PARKWAY

301 SOUTH COLLEGE STREET MARGATE, FL 33063 CHARLOTTE, NC 28288

FEI Number: 20-0322984 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPORATION SERVICE COMPANY PROCACCI, PHILIP J

1201 HAYS STREET 5082 COCONUT CREEK PARKWAY

TALLAHASSEE, FL 323012525 US MARGATE, FL 33063 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: PHILIP J PROCACCI 05/04/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

Name:JONES, EVANDER S JR.Name:PROCACCI, PHILIP JAddress:301 SOUTH COLLEGE STREETAddress:5082 COCONUT CREEK PARKWAY

City-St-Zip: CHARLOTTE, NC 29288 City-St-Zip: MARGATE, FL 29288

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 BREWER, LYNWOOD C
 Name:

 Address:
 301 SOUTH COLLEGE STREET
 Address:

 City-St-Zip:
 CHARLOTTE, NC 29288
 City-St-Zip:

Title: MGR (X) Delete Title: () Change () Addition

 Name:
 MONTGOMERY, DAVID C
 Name:

 Address:
 1339 CHESTNUT STREET
 Address:

 City-St-Zip:
 PHILADELPHIA, PA 19109
 City-St-Zip:

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.

SIGNATURE: PHILIP J PROCACCI MGR 05/04/2004