2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

Mar 16, 2005 08:00 AM DOCUMENT # M03000003855 **Secretary of State GRANT PROPERTY LLC** Principal Place of Business Mailing Address 2711 CENTERVILLE ROAD, STE. 400 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808 WILMINGTON, DE 19808 02172005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1133064 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GRANT, RUSSELL J JR. DO NOT WRITE 591 NEÁPOLITAN LANE NAPLES, FL 34103 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 reinstating) Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE HALPERN, CHRISTINE M NAME STREET ADDRESS 151 BROOKS BEND U00000264171 03/16/05-80004-024 50.00 CITY-ST-ZIP PRINCETON, NJ 08540 MGRM TITLE GRANT, RUSSELL J JR NAME STREET ADDRESS **591 NEAPOLITAN LANE** NAPLES, FL 34103 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CTY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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 my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Russell J Grant

3-13-05

down loaded FORM FER WEBSITE

239 - 649 - 403 Daytime Phone #

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