2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 19, 2005
Secretary of State

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Entity Name: FACCHINA-MCGAUGHAN, LLC

Current Principal Place of Business:

7101 WISCONSIN AVE, STE 1403
BETHESDA, MD 208144865

New Principal Place of Business:

Current Mailing Address:

7101 WISCONSIN AVE, STE 1403
BETHESDA, MD 208144865

New Mailing Address:

FEI Number: 20-0809039 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MCGAUGHAN, ALEXANDER S JR
6600 N ANDREWS AVE, STE 590
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title:	MGR	( ) Delete
Name:	FACCHINA, PAUL V SR	
Address:	102 CENTENNIAL ST	
City-St-Zip:	LAPLATA, MD 20646	
Title:	MGR	( ) Delete
Name:	MCPHERSON, CHARLES W	
Address:	102 CENTENNIAL ST	
City-St-Zip:	LAPLATA, MD 20646	
Title:	MGR	( ) Delete
Name:	MCGAUGHAN, A.S. JR.	
Address:	7101 WISCONSIN AVE, STE 1403	
City-St-Zip:	BETHESDA, MD 208144865	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
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: A.S. MCGAUGHAN, JR. PRES 01/19/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date