


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M04000002412 1. Entity Name FLORIDA ACQUISITIONS 1, LLC		
Principal Place of Business C/O URBAN INVESTMENT ADV./ATN: C.C. DAVIS 1320 19TH STREET, N.W., SUITE 800 WASHINGTON, DC 20036		Mailing Address C/O URBAN INVESTMENT ADV./ATN: C.C. DAVIS 1320 19TH STREET, N.W., SUITE 800 WASHINGTON, DC 20036
2. Principal Place of Business <i>C/O UIA Mgmt, LLC</i> Suite, Apt. #, etc. <i>1111 Lincoln Rd, Suite 760</i> City & State <i>Miami Beach, FL</i> Zip <i>33139</i>		3. Mailing Address <i>C/O UIA Mgmt, LLC</i> Suite, Apt. #, etc. <i>1111 Lincoln Rd, Suite 760</i> City & State <i>Miami Beach, FL</i> Zip <i>33139</i>
4. FEI Number APPLIED FOR		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired		<input type="checkbox"/> \$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>		
Filing Fee is \$50.00 Due by September 7, 2005		Make check payable to Florida Department of State
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR URBAN INVESTMENTS II, LLC 1320 19TH STREET, N.W., SUITE 800 ASHINGTON, DC 20036	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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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.		
Florida Acquisitions 1, LLC, by its sole member, Urban Investments II, LLC, by its managing member, Urban Investments Advisors, LLC, by its managing member, Wellspring Investments Management I, LLC.		
SIGNATURE: <u>Robert S. Wennett</u>		Robert S. Wennett, Managing Member
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		Date _____ Daytime Phone # _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



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