## 2005 LIMITED LIABILITY COMPANY

## FILED Feb 07, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # M0400003977 1. Entity Name **HUNT PARTNERS RETAIL GROUP #1, LLC** Mailing Address Principal Place of Business 125 W. GRIGGS AVE. 125 W. GRIGGS AVE. LAS CRUCES, NM 88001 LAS CRUCES, NM 88001 02022005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-3167877 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE FLORIDA FILING & SEARCH SERVICES, INC. 1333 N. DUVALL STREET TALLAHASSEE, FL 32303 IN THIS SPACE 3. 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. MGR TITLE LOPEZ, EDGAR 125 W. GRIGGS AVE. STREET ADDRESS LAS CRUCES, NM 88001 CiTY-ST-7IP U00000219335 MGR TITLE 02/08/05-80026-001 50.00 HUNT, JACK NAME 125 W. GRIGGS AVE. STREET ADDRESS LAS CRUCES, NM 88001 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CiTY-ST-ZIP TITLE

11. I hereby certify that the information supplied with this filling does not quality 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 receiptor trustee empowered to execute this report as required by Chapter 608. Florida Statutes.

SIGNATURE OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS