2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032821

Entity Name: LOGGERHEAD PROPERTIES, INC.

FILED Jan 03, 2005 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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725 NORTH A1A, STE C108 725 NORTH A1A, JUPITER, FL 33477 C 109

JUPITER, FL 33477

Current Mailing Address: New Mailing Address:

725 NORTH A1A, STE C108 725 NORTH A1A, JUPITER, FL 33477 C 109 JUPITER, FL 33477

FEI Number: 01-0630172 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:

SHAW, MATHEW T SHAW, MATHEW T P
725 NORTH A1A, STE C108 725 NORTH A1A,
JUPITER, FL 33477 US C109
JUPITER, FL 33477 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: MATTHEW T. SHAW 01/03/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: SINGER, JAY S Name: SINGER, JAY S D

 Address:
 320 LEEWARD DR.
 Address:
 725 NORTH A1A SUITE C109

 City-St-Zip:
 JUPITER, FL 33477
 City-St-Zip:
 JUPITER, FL 33477

Title: D () Delete Title: P (X) Change () Addition Name: SHAW, MATHEW T P

 Address:
 320 LEEWARD DR.
 Address:
 725 NORTH A1A SUITE C109

 City-St-Zip:
 JUPITER, FL 33477
 City-St-Zip:
 JUPITER, FL 33477

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

 Name:
 SINGER, RENEE O
 Name:

 Address:
 320 LEEWARD DR.
 Address:

 City-St-Zip:
 JUPITER, FL 33477
 City-St-Zip:

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

 Name:
 SHAW, KATE M
 Name:

 Address:
 320 LEEWARD DR.
 Address:

 City-St-Zip:
 JUPITER, FL 33477
 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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MATTHEW T. SHAW P 01/03/2005