2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 05, 2004 8:00 am Secretary of State

| Principal Place of Business Mailing Address | |
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| PANAMA CITY, FL 32411 PANAMA CITY, FL 32411 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEł Number Applied Fc | |
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| City & State City & State 4. FEt Number Applied For | |
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| Zip Country Zip Country 5. Certificate of Status Desired See Required | |
| 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent | |
| HUGHES, J. ROBERT | |
| 220 MCKENZIE AVENUE PANAMA CITY, FL 32402 Street Address (P.O. Box Number is Not Acceptable) | |
| TAWARA OFFI, TE OZ IOZ | |
| City FL Zip Code | |
| 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. It am familiar with, and accepted by the obligations of registered agent. | ept |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | |
| | |
| Filing Fee is \$50.00 Due by May 1, 2004 Make check payable to Florida Department of State | |
| 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES | |
| TITLE M Delete TITLE Change Ad | noilit |
| Laure LAME CRANN 0.00 INC | |
| NAME W.F. SPANN & CO., INC. STREET ADDRESS 3900 MARRIOTT DR., SUITE K STREET ADDRESS | |
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11. I nereby certify that the information supplied with this litting 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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/3/04

850-235-6900

Daytime Phone #