2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE

Aug 30, 2004 08:00 AM Secretary of State DOCUMENT # L01000011874 1776, L.L.C. Principal Place of Business Mailing Address 213 THE ESPLANADE SOUTH 213 THE ESPLANADE SOUTH VENICE, FL 34285 VENICE, FL 34285 08102004No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0172511 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent PACHOTA, MICHAEL DO NOT WRITE 213 THE ESPLANADE SOUTH VENICE, FL 34285 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title dispolicable (NOTE: Registered Agent argusture required when reinstating) DATE Filing Fee is \$50.00 Due by September 8, 2004 U00000171107 08/30/04-80004-008 50.00 9. MANAGING MEMBERS/MANAGERS O स्सा ह PACHOTA, MICHAEL V NAME 213 THE ESPLANADE SOUTH STREET ADDRESS CITY-ST-ZP VENICE, FL 34285 TITLE NAME STREET ADDRESS C/TY-51-2/P TITLE MASS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE HAME STREET ADDRESS CITY-ST-ZIP BRLE NAME STREET ADDRESS CTTY-ST-ZIP 333LE SEASAE STREET ADDRESS CITY-ST-ZP 11. I hereby certify that title information supplied with this filling 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 aignature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability complainty or the receiver of trustee employered to execute this report as required by Chapter 608, Florida Statutes.

IG MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Caytime Phone #

FILED