## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000012320

**1.** Entity Name
MANATEE REAL ESTATE TRUST, L.L.C.

| Principal Place of Business | Mailing Address |
|---|---|
| 821 S.E. HIGHWAY 19 | 821 S.E. HIGHWAY 19 |
| CRYSTAL RIVER, FL  34429 | CRYSTAL RIVER, FL  34429 |

## DO NOT WRITE IN THIS SPACE

02122004 No Chg-LLC          CR2E083 (10/03)

| **4.** FEI Number | Applied For |
|---|---|
| 58-9181062 | Not Applicable |

**5.** Certificate of Status Desired  ☐  **$5.00** Additional Fee Required

**6.** Name and Address of Current Registered Agent

GOODENOW, RON
821 S.E. HIGHWAY 19
CRYSTAL RIVER, FL  34429

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**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 if applicable          (NOTE Registered Agent signature required when reinstating)          DATE

**Filing Fee is $50.00**
**Due by May 1, 2004**

**9.**                    MANAGING MEMBERS/MANAGERS

| | |
|---|---|
| TITLE | MGRM |
| NAME | GOODENOW, RON |
| STREET ADDRESS | P.O. BOX 2209 |
| CITY-ST-ZIP | HOMOSASSA SPRINGS, FL  34447 |
| TITLE | |
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02/27/04-80062-016  150.00

## DO NOT WRITE IN THIS SPACE

**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.

SIGNATURE: X _____  President  2-25-07  352 563-0041

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE          Date          Daytime Phone #