

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Jan 11, 2004
Secretary of State**

DOCUMENT# L02000012379

Entity Name: THE WILD ORCHID, LLC

Current Principal Place of Business:

1631 WEST SNOW CIR.
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

8812 CROSSWOOD COURT
RIVERVIEW, FL 33569

New Mailing Address:

FEI Number: 01-0684426 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIVEL, CHRISTY
8812 CROSSWOOD COURT
RIVERVIEW, FL 33569 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SHIVEL, CHRISTY
Address: 8812 CROSSWOOD CT
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
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 is true and accurate and that my electronic 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: CHRISTY SHIVEL

MGRM

01/11/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date