2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 22, 2004
Secretary of State

DOCUMENT# L02000024811

Entity Name: NICI & COX, LLC

Current Principal Place of Business:

1185 IMMOKALEE RD.
SUITE 110
NAPLES, FL 34110

New Principal Place of Business:

Current Mailing Address:

1185 IMMOKALEE RD.
SUITE 110
NAPLES, FL 34110

New Mailing Address:

FEI Number: 61-1427048 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NICI, JAMES R
C/O COX & NICI
1185 IMMOKALEE ROAD, SUITE 100
NAPLES, FL 34110 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: MGR ( ) Delete
Name: NICI, JAMES R
Address: 1185 IMMOKALEE RD., STE 110
City-St-Zip: NAPLES, FL 34110

Title: MGR ( ) Delete
Name: COX, JOE B
Address: 1185 IMMOKALEE RD., STE 110
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JAMES R. NICI MGR 01/22/2004

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