

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011286

FILED
Apr 15, 2004
Secretary of State

Entity Name: TOMOKA INDIAN MOTOCYCLE LLC

Current Principal Place of Business:

1089 N. HWY US 1
ORMOND BEACH,, FL 32174

New Principal Place of Business:

Current Mailing Address:

1089 N. HWY US 1
ORMOND BEACH,, FL 32174

New Mailing Address:

FEI Number: 22-3893849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLAWN, THOMAS A
55 NORTH RIDGEWOOD AVE.
ORMOND BEACH, FL 32174 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: BLAWN, THOMAS A
Address: 55 N. RIDGEWOOD AVE.
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGRM () Delete
Name: HARTLEY, RICHARD H
Address: 307 WATER OAK LANE
City-St-Zip: ORMOND BEACH, FL 32174

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: THOMAS A BLAWN

MGR

04/15/2004

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