

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000040273

FILED  
Apr 21, 2004  
Secretary of State

Entity Name: AMPROP MANAGEMENT, LLC

**Current Principal Place of Business:**

4210 WEST SPRUCE, SUITE 202  
TAMPA, FL 336074161

**New Principal Place of Business:**

4210 WEST SPRUCE STREET  
STE 202  
TAMPA, FL 336074161 US

**Current Mailing Address:**

4210 WEST SPRUCE, SUITE 202  
TAMPA, FL 336074161

**New Mailing Address:**

4210 WEST SPRUCE STREET  
STE 202  
TAMPA, FL 336074161 US

FEI Number: 51-0487063

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEFAN, TIMOTHY P  
4210 WEST SPRUCE, SUITE 202  
TAMPA, FL 336074161

**Name and Address of New Registered Agent:**

STEFAN, TIMOTHY P  
4210 WEST SPRUCE STREET  
STE 202  
TAMPA, FL 336074161 US

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

04/21/2004

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: STEFAN, TIMOTHY P  
Address: 4210 WEST SPRUCE, SUITE 202  
City-St-Zip: TAMPA, FL 336074161

**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: TIMOTHY P STEFAN

MGR

04/21/2004

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