2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000002257

Entity Name: ASSET MANAGEMENT ADVISORS, L.L.C.

FILED May 01, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3801 PGA BLVD. **SUITE #555** PALM BEACH GARDENS, FL 33410 **New Mailing Address: Current Mailing Address:** 3801 PGA BLVD. SUITE #555 PALM BEACH GARDENS, FL 33410 FEI Number: 65-0915666 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: **KEVIN LAKIN** 3801 PGA BLVD SUITE 555 PALM BEACH GARDENS, FL 33410 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 Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete PERRY, HENRY A Name: Name: 3801 PGA BLVD SUITE 555 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WULSIN, HARRY H Name: Name: Address: 3801 PGA BLVD SUITE 555 Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: MGR () Delete Title: () Change () Addition O'DONNELL, BARBARA Name: Name: Address: 3801 PGA BLVD SUITE 555 Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: LAKIN, KEVIN R Name: 3801 PGA BLVD SUITE 555 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WILSON, HUNTER Name: Name: 3801 PGA BLVD SUITE 555 Address: Address: City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: Title: () Delete Title: () Change () Addition MELHALKO, ANDREW Name: Name: Address: 3801 PGA BLVD SUITE 555 Address:

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.

City-St-Zip:

SIGNATURE: KEVIN R. LAKIN MGR 05/01/2004

PALM BEACH GARDENS, FL 33410

City-St-Zip: