


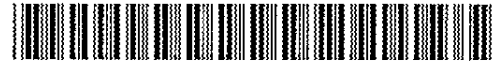
2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan-26, 2004 08:00 AM
Secretary of State

| | |
|---|---|
| DOCUMENT # L99000007265 1. Entity Name ZOLLER, NAJJAR & SHROYER, L.C. |  |
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|---|---|
| Principal Place of Business 201 - 5TH AVENUE DRIVE EAST BRADENTON, FL 34208 | Mailing Address PO BOX 9448 BRADENTON, FL 34206 |
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DO NOT WRITE IN THIS SPACE



01212004 No Chg-LLC CR2E083 (10/03)

| | |
|--|--------------------------------|
| 4. FEI Number 65-0961154 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent HARRISON, THOMAS W 1206 MANATEE AVENUE WEST BRADENTON, FL 34205 |
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$50.00
Due by May 1, 2004

| 9. MANAGING MEMBERS/MANAGERS | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR ZOLLER, DAN C 201 - 5TH AVENUE DRIVE EAST BRADENTON, FL 34208 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGR NAJJAR, LEONARD J 4710 OAKRUN DRIVE SARASOTA, FL 34243 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | |
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01/26/04-80023-009 55.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: Dan C. Zoller 1/21/04 941-748-8080
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #