

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000737

FILED
Jan 06, 2004
Secretary of State

Entity Name: LDG FINANCIAL SERVICES, LLC

Current Principal Place of Business:

4553 WINTERS CHAPEL RD
#200
ATLANTA, GA 30360

New Principal Place of Business:

Current Mailing Address:

4553 WINTERS CHAPEL RD
#200
ATLANTA, GA 30360

New Mailing Address:

FEI Number: 58-2407228 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGRM () Delete
Name: CARBO, REMBERTO JR
Address: 4553 WINTERS CHAPEL RD #200
City-St-Zip: ATLANTA, GA 30360

Title: MGRM () Delete
Name: CARBO, MARSHA
Address: 4553 WINTERS CHAPEL RD #200
City-St-Zip: ATLANTA, GA 30360

Title: MGRM () Delete
Name: FLETCHER, DAVID G
Address: 4553 WINTERS CHAPEL RD #200
City-St-Zip: ATLANTA, GA 30360

ADDITIONS/CHANGES:

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

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: DAVID G. FLETCHER

MGRM

01/06/2004

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