

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000002458

FILED
Apr 22, 2004
Secretary of State

Entity Name: ACMG, LLC

Current Principal Place of Business:

1215 VIA LUGANO
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

1215 VIA LUGANO
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 20-0097322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLSEN, JAMES M.D.
1215 VIA LUGANO
WINTER PARK, FL 32789

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: CARLSON, JAMES M.D.
Address: 1215 VIA LUGANO
City-St-Zip: WINTER PARK, FL 32789

Title: MGR () Delete
Name: CARLSON, KAREN P
Address: 1215 VIA LUGANO
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CARLSEN, JAMES M.D.
Address: 1215 VIA LUGANO
City-St-Zip: WINTER PARK, FL 32789

Title: MGR (X) Change () Addition
Name: CARLSEN, KAREN P
Address: 1215 VIA LUGANO
City-St-Zip: WINTER PARK, FL 32789

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: KAREN P. CARLSEN

MGR

04/22/2004

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