2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000002815

1. Entity Name 8307 PONCE, LLC



Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

6106 MACARTHUR BLVD. BETHESDA. MD 20816 6106 MACARTHUR BLVD. BETHESDA, MD 20816

FILED Apr 26, 2004 8:00 am Secretary of State

04-26-2004 90037 033 ****50.00

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04202004 No Chg-LLC

CR2E083 (10/03)

4.	FEI Number
	03-0383961

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6."Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

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the obligations of registered agent.					
- SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE		
And Fi	iling Fee is \$50.00 ue by May 1, 2004		-		
9.	MANAGING MEMBERS/MANAGERS	·			
TITLE	MGR				
NAME	PHILLIPS, LELAND H				
STREET ADDRESS	6106 MACARTHUR BLVD.				
CITY-ST-ZIP	BETHESDA, MD 20816				
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information					

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

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Labord H. Phillips
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/20/04

Daytime Phone #