## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **FILED** Apr 29, 2004 08:00 AM **DOCUMENT # L00000003081 Secretary of State** 1. Entity Name BUTLER ENTERPRISES, L.L.C. Principal Place of Business Mailing Address P.O. BOX 1176 P.O. BOX 1176 LAKELAND, FL 33802 LAKELAND, FL 33802 04202004 No Cha-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3635642 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BUTLER, ALETHA A DO NOT WRITE 1400 GRASSLAND BLVD **APT 15** IN THIS SPACE LAKELAND, FL 33803-5450 3. 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\_ Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registored Agent signature required when renatating) DATE Filing Fee is \$50.00 Due by May 1, 2004 U000001373**3**8 9. MANAGING MEMBERS/MANAGERS TITLE MGR NAME **BUTLER, ALETHA** STREET ADDRESS P.O. BOX 1176 CITY-ST-ZP LAKELAND, FL 33802 TITLE NAME STREET ADDRESS CITY-ST-ZP TIRE HALE STREET ADDRESS DO NOT WRITE CITY-ST-ZP TITLE IN THIS SPACE MAKE STREET ADORESS CITY-ST-ZIP

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 flability company of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

mF NAME STREET ADDRESS CITY-ST-ZP បាមក NAME STREET ADDRESS CITY-SI-ZP