2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000003523

Entity Name: SOURCE PROPERTIES, LLC

FILED Apr 16, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 651 DON BISHOP RD. SANTA ROSA BEACH, FL 32459 **Current Mailing Address: New Mailing Address:** 651 DON BISHOP RD. SANTA ROSA BEACH, FL 32459 FEI Number: 59-3639405 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILKS, DIANE 651 DÓN BISHOP RD. SANTA ROSA BEACH, FL 32459 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: ADDITIONS/CHANGES:** MGRM () Delete () Change () Addition DAVIS, MC Name: Name: Address: 651 DON BISHOP RD. Address: City-St-Zip: SANTA ROSA BEACH, FL 32459 City-St-Zip: Title: MEM (X) Delete Title: () Change () Addition

Name:

Address:

Address:

City-St-Zip:

City-St-Zip:

Title: MEM (X) Delete
Name: HARPER, ROBERT

WILKS, DIANE

651 DON BISHOP RD.

SANTA ROSA BEACH, FL 32459

Name:

Address:

City-St-Zip:

Address: 908 S. FLORIDA AVE., SUITE 106
City-St-Zip: LAKELAND, FL 33803

Title: () Change () Addition Name:

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: MC DAVIS MGRM 04/16/2004