

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000013366

FILED
Jan 19, 2004
Secretary of State

Entity Name: KNOPKE CONSULTING SERVICES, LLC

Current Principal Place of Business:

2203 NW 9TH PLACE
GAINESVILLE, FL 32605

New Principal Place of Business:

3939 WESTWOOD CIRCLE
FLAGSTAFF, AZ 86001

Current Mailing Address:

2203 NW 9TH PLACE
GAINESVILLE, FL 32605

New Mailing Address:

3939 WESTWOOD CIRCLE
FLAGSTAFF, AZ 86001

FEI Number: 90-0075322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KNOPKE, RAYMOND C JR.
2203 NW 9TH PLACE
GAINESVILLE, FL 32605

Name and Address of New Registered Agent:

KNOPKE, RAYMOND C JR.
12031 N RIVERHILLS DR
TAMPA, FL 33617

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

01/19/2004

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: KNOPKE, RAYMOND C JR
Address: 2203 NW 9TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KNOPKE, RAYMOND C JR
Address: 3939 WESTWOOD CIRCLE
City-St-Zip: FLAGSTAFF, AZ 86001

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: RAYMOND C KNOPKE JR

MGRM

01/19/2004

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