

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000194

FILED
Mar 29, 2004
Secretary of State

Entity Name: BACRET ENTERPRISES LTD. CO.

Current Principal Place of Business:

6536 6TH AVE N
SAINT PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

PO BOX 9665
TREASURE ISLAND, FL 33740

New Mailing Address:

FEI Number: 59-3688038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHAPMAN, CONNIE
6536 6TH AVE N
SAINT PETERSBURG, FL 33710

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: CHAPMAN, CONNIE
Address: 6536 6TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

Title: MGR () Delete
Name: MATTERN, BRUCE W
Address: 6536 6TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33710

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CONNIE CHAPMAN

MGR

03/29/2004

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