

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000001863

FILED
May 01, 2004
Secretary of State

Entity Name: COURTESY SYSTEMS, LLC

Current Principal Place of Business:

222 NE 1ST STREET
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

222 NE 1ST STREET
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number: 59-3694128

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLTON, JOE W
222 NE 1ST STREET
GAINESVILLE, FL 32601

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: MGRM () Delete
Name: BOLTON, JOE W
Address: 222 NE 1ST ST
City-St-Zip: GAINESVILLE, FL 32601

Title: MGRM () Delete
Name: KIESZEK, LARRY D
Address: 222 NE 1ST ST
City-St-Zip: GAINESVILLE, FL 32601

Title: MGRM () Delete
Name: PATRAY, JAMES
Address: 222 NE 1ST ST
City-St-Zip: GAINESVILLE, FL 32601

Title: MGRM () Delete
Name: GALYEAN, MICHAEL W
Address: 5306 CORTEZ RD WEST #5
City-St-Zip: BRADENTON, FL 34210

Title: MGRM () Delete
Name: RANGEL, MARCELO
Address: 4612 HOWELL FARMS DR
City-St-Zip: ACWORTH, GA 30101

ADDITIONS/CHANGES:

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

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

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

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: JAMES PATRAY

MGRM

05/01/2004

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