

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002279

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: SELECTION MASTER INTEGRATED, LLC

**Current Principal Place of Business:**

2647 JEWEL ROAD  
JACKSONVILLE, FL 32216

**New Principal Place of Business:**

**Current Mailing Address:**

2647 JEWEL ROAD  
JACKSONVILLE, FL 32216

**New Mailing Address:**

FEI Number: 59-3697895

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

F & L CORP.  
200 LAURA STREET  
JACKSONVILLE, FL 32202 US

**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: PD ( ) Delete  
Name: VARNES, EDWARD C  
Address: 2647 JEWEL RD.  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VD ( ) Delete  
Name: THE AUCHTER COMPANY,  
Address: P O BOX 1193  
City-St-Zip: JACKSONVILLE, FL 32201

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: VARNES, EDWARD C  
Address: 2647 JEWEL RD.  
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGR (X) Change ( ) Addition  
Name: THE AUCHTER COMPANY,  
Address: P O BOX 1193  
City-St-Zip: JACKSONVILLE, FL 32201

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: EDWARD C VARNES

MGR

04/19/2004

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