

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002945

FILED  
Apr 29, 2004  
Secretary of State

Entity Name: FLORIDA TECHNOLOGY PARTNERS, LLC.

## Current Principal Place of Business:

5353 CONROY ROAD,  
SUITE 200  
ORLANDO, FL 32811

## New Principal Place of Business:

355 TWELVE OAKS DRIVE  
SUITE 100  
WINTER SPRINGS, FL 32708

## Current Mailing Address:

5353 CONROY ROAD,  
SUITE 200  
ORLANDO, FL 32811

## New Mailing Address:

355 TWELVE OAKS DRIVE  
SUITE 100  
WINTER SPRINGS, FL 32708

FEI Number: 41-2035703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHHAGANLAL, KIRAN  
5353 CONROY ROAD,  
SUITE 200  
ORLANDO, FL 32811

## Name and Address of New Registered Agent:

CHHAGANLAL, KIRAN C  
355 TWELVE OAKS DRIVE  
SUITE 100  
WINTER SPRINGS, FL 32708

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: KIRAN C CHHAGANLAL

04/29/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: CHHAGANLAL, KIRAN  
Address: 5353 CONROY ROAD, SUITE 200  
City-St-Zip: ORLANDO, FL 32811

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: CHHAGANLAL, KIRAN  
Address: 355 TWELVE OAKS DRIVE, SUITE 100  
City-St-Zip: WINTER SPRINGS, FL 32708

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: KIRAN C CHHAGANLAL

MGR

04/29/2004

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