

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004064

FILED
Apr 14, 2004
Secretary of State

Entity Name: PHOENIX, L.L.C.

Current Principal Place of Business:

5790 14TH AVENUE N.W.
NAPLES, FL 34119

New Principal Place of Business:

Current Mailing Address:

5790 14TH AVENUE N.W.
NAPLES, FL 34119

New Mailing Address:

FEI Number: 59-3745303

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRANCHINO, THOMAS W
1250 N. TAMiami TRAIL, SUITE 106
NAPLES, FL 34102 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: P () Delete
Name: JOHNS, RANDY
Address: 5790 14TH AVENUE N.W.
City-St-Zip: NAPLES, FL 34119

Title: VP () Delete
Name: MCVICKER, KEVIN
Address: 5790 14TH AVENUE N.W.
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOHNS, RANDY
Address: 5790 SHADY OAKS LANE
City-St-Zip: NAPLES, FL 34119

Title: MGRM (X) Change () Addition
Name: MCVICKER, KEVIN
Address: 5790 SHADY OAKS LANE
City-St-Zip: NAPLES, FL 34119

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: KEVIN MCVICKER

MGRM

04/14/2004

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