

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004110

FILED
Jan 14, 2004
Secretary of State

Entity Name: BUTLER, DUNLAP & LINDQUIST, LLC

Current Principal Place of Business:

1882 CAPITAL CIRCLE N.E.
SUITE 201
TALLAHASSEE, FL 32308 US

New Principal Place of Business:

Current Mailing Address:

1882 CAPITAL CIRCLE N.E.
SUITE 201
TALLAHASSEE, FL 32308 US

New Mailing Address:

FEI Number: 59-3708047 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUTLER, TIMOTHY J
1882 CAPTIAL CIRCLE, N.E.
SUITE 201
TALLAHASSEE, FL 32308

Name and Address of New Registered Agent:

BUTLER, TIMOTHY J
1882 CAPITAL CIRCLE, N.E.
SUITE 201
TALLAHASSEE, FL 32308

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: _____

01/14/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BUTLER, TIMOTHY J
Address: 1882 CAPITAL CIRCLE N.E., SUITE 201
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGRM () Delete
Name: DUNLAP,IV, GEORGE T
Address: 1882 CAPITAL CIRCLE N.E., SUITE 201
City-St-Zip: TALLAHASSEE, FL 32308

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: TIMOTHY J. BUTLER

MGRM

01/14/2004

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