

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000004477

FILED  
Sep 08, 2004  
Secretary of State

**Entity Name:** TUCKER RIDGE FINANCIAL PARTNERS, LLC

**Current Principal Place of Business:**

4490 CASPER COURT  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

3602 OTTAWA LANE  
COOPER CITY, FL 33026

**Current Mailing Address:**

4490 CASPER COURT  
HOLLYWOOD, FL 33021

**New Mailing Address:**

3602 OTTAWA LANE  
COOPER CITY, FL 33026

**FEI Number:** 65-1090511

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACOBS, STEVEN C  
4490 CASPER COURT  
HOLLYWOOD, FL 33021 US

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

JACOBS, STEVEN C  
3602 OTTAWA LANE  
COOPER CITY, FL 33026 US

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:

09/08/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: JACOBS, STEVEN C  
Address: 4490 CASPER COURT  
City-St-Zip: HOLLYWOOD, FL

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: JACOBS, STEVEN C  
Address: 3602 OTTAWA LANE  
City-St-Zip: HOLLYWOOD, FL 33026

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: STEVEN C. JACOBS

MGRM

09/08/2004

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