2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000005275

1. Entity Name

URBAN LIFE MANAGEMENT, L.L.C.

FILED Feb 16, 2004 08:00 AM Secretary of State

Principal Place of Business

617 E CENTRAL BV ORLANDO, FL 32801

SIGNATURE:

Mailing Address

617 E CENTRAL BV ORLANDO, FL. 32801



DO NOT WRITE IN THIS SPACE

4. FEI Number	 Applied For
59-3711047	Not Applicable
5. Certificate of Status Desired	\$5.00 Additional Fee Required

Caytime Phone #

6. Name and Address of Current Registered Agent

BREWERTON, JOHN L III 250 NORTH ORANGE AVENUE, PENTHOUSE SUITE ORLANDO, FL 32801

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the purpose of char- tions of registered agent.	nging its registered office or registered agent, or t	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent agreture required when renstating)	DATE
F	iling Fee is \$50.00 ue by May 1, 2004		U00000053728 02/16/04-80144-002 50.00
9.	MANAGING MEMBERS/MANAGERS		
title name street address cxty-st-zip	MGRM SCHEIWILLER, ROBERT T 617 E CENTRAL BV SCHEIWILLER ORLANDO, FL 32801		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DC	NOT WRITE
TITLE MANE STREET ADDRESS CITY-ST-ZP		IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CRTY-ST-ZP			

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes, I further cortify that the information inclicated on this report is true and accurate end that thy signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PERMIED NAME OF SKINING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE