


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 04, 2004 8:00 am
Secretary of State

03-04-2004 90071 009 ****55.00

DOCUMENT # L01000007993 1. Entity Name RIVER COLONY CONDOMINIUMS, L.L.C.					
Principal Place of Business 13840 RIVER ROAD PENSACOLA, FL 32507			Mailing Address 14024 WATERVIEW DR. PENSACOLA, FL 32507		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country		3. Mailing Address 4588 Highway 20 East Suite, Apt. #, etc. Suite B City & State Niceville, FL Zip Country 32578 			
		02192004 Chg-LLC CR2E083 (10/03)		4. FEI Number 59-3721338	
		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent ROBERTSON, ROBERT D 14024 WATERVIEW DR. PENSACOLA, FL 32507			7. Name and Address of New Registered Agent Name Herman L. Neese, Jr. Street Address (P.O. Box Number is Not Acceptable) 4588 Highway 20 East Suite B City FL Zip Code 32578		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____					
Filing Fee is \$50.00 Due by May 1, 2004				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ROBERTSON, ROBERT D 14024 WATERVIEW DR. PENSACOLA, FL 32507		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM A & J Holdings, LLC 4588 Highway 20 East, Suite B Niceville, Florida 32578	
	<input checked="" type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Herman L. Neese, Jr.</i>			Authorized Representative (850) 897-8944		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date Daytime Phone #		

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