


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90098 045 ****50.00

DOCUMENT # L01000008290

1. Entity Name
 CHAMPION CENTER REALTY CO., L.L.C.




Principal Place of Business
 4982 WEST ATLANTIC BLVD. MARGATE, FL 33063

Mailing Address
 4996 W ATLANTIC BLVD P.O. BOX 8552 CORAL SPRINGS, FL 33075

DO NOT WRITE IN THIS SPACE

24012412



01232004No Chg-LLC CR2E083 (10/03)

4. FEI Number
 65-1107626 Applied For
 Not Applicable

5. Certificate of Status Desired \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PETER J SCHWEITZER ASSOCIATION, INC.
 4982 W ATLANTIC BLVD MARGATE, FL 33063

4996 W ATLANTIC BLVD

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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: *Peter J Schweitzer* Peter J Schweitzer DATE: 2/12/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SCHWEITZER REALTY GROUP, LTD P.O. BOX 8552 CORAL SPRINGS, FL 33075
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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 trustee or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Peter J Schweitzer* Peter J Schweitzer DATE: 2/12/04 954-972-0322

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #