## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PENTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Kenneth L. Shimm, Managing Member

#### **DOCUMENT # L01000008761**

1. Entity Name
OLD ALABAMA, LLC



Principal Place of Business

SIGNATURE:

Mailing Address

2101 WEST COMMERCIAL BLVD., SUITE 4100 FT LAUDERDALE, FL 33309

2101 WEST COMMERCIAL BLVD., SUITE 4100 FT LAUDERDALE. FL 33309

### FILED Mar 25, 2004 8:00 am Secretary of State

03-25-2004 90218 006 \*\*\*\*50.00

CHUMUUUU



02042004 No Chg-LLC

CR2E083 (10/03)

954-492-1980

4. FEI Number		Applied For
65-1109790		Not Applicable
5. Certificate of Status Desired		O Additional

6. Name and Address of Current Registered Agent

FORMAN, ROBERT S ESQUIRE 2101 WEST COMMERCIAL BOULEVARD, SUITE 4100 FT LAUDERDALE, FL 33309

# DO NOT WRITE IN THIS SPACE

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_	Signature, typed or printed name of registered agent and title it applicable.	(NOTE: Registered Agent s	signature required when reinstating)	DATE	
Fi D	ling Fee is \$50.00 ue by May 1, 2004				
9.	MANAGING MEMBERS/MANAGERS				
TITLE	MGRM				
NAME	SHIMM, KENNETH L				
STREET ADDRESS	2101 W COMMERCIAL BLVD., STE 4100				
CITY-ST-ZIP	FORT LAUDERDALE, FL 33309				
TITLE					
NAME					
STREET ADDRESS		i			
CITY-ST-ZIP					
TITLE					
NAME					
STREET ADDRESS			DO NOT W	/DITE	
CITY-\$T-ZIP			DO NOT W	KIIE	
TITLE			IN THIS SE		
NAME			114 1 1119 91	ACE	
STREET ADDRESS		1			
CITY-ST-ZIP		1			
TITLE					
NAME					
STREET ADDRESS		i			
CITY-ST-ZIP					
TITLE					
NAME		J			
STREET ADDRESS					
CITY-ST-ZIP					
11. I hereby certify that the information supplied with this filling 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.					