

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000012344

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: 2160 DELTA BOULEVARD, LLC

**Current Principal Place of Business:**

2585 HICKORY RIDGE ROAD  
TALLAHASSEE, FL 32308

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 13613  
TALLAHASSEE, FL 32317

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

GEEKER, VAN P  
VAN P. GEEKER, P.A.  
1501 PARK AVE. EAST  
TALLAHASSEE, FL 32301 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title:                      P                      ( ) Delete  
Name:                      KOIKOS, GEORGE N  
Address:                      2585 HICKORY RIDGE RD.  
City-St-Zip:                      TALLAHASSEE, FL 32308

Title:                      VP                      ( ) Delete  
Name:                      KOIKOS, KAREN L  
Address:                      2585 HICKORY RIDGE RD.  
City-St-Zip:                      TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES:**

Title:                      MGR                      (X) Change ( ) Addition  
Name:                      KOIKOS, GEORGE N  
Address:                      2585 HICKORY RIDGE RD.  
City-St-Zip:                      TALLAHASSEE, FL 32308

Title:                      MGR                      (X) Change ( ) Addition  
Name:                      KOIKOS, KAREN L  
Address:                      2585 HICKORY RIDGE RD.  
City-St-Zip:                      TALLAHASSEE, FL 32308

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: KAREN L KOIKOS                      MGR                      04/30/2004

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