


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 11, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000012654 1. Entity Name MCGOUGH PROPERTIES, L.L.C.	
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Principal Place of Business 706 S. BAY BLVD. ANNA MARIA, FL 34216	Mailing Address P.O. BOX 1300 ANNA MARIA, FL 34216
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DO NOT WRITE IN THIS SPACE

03042004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3737627	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

MCGOUGH, DAVID C
706 S. BAY BLVD.
ANNA MARIA, FL 34216

**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 if applicable (NOTE: Registered Agent signature required when reinstating) DATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCGOUGH, ANN CLIFFORD 706 S. BAY BLVD. ANNA MARIA, FL 34216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCGOUGH, DAVID C 706 S. BAY BLVD. ANNA MARIA, FL 34216
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03/11/04-80053-007 50.00

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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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: *DAVID MCGOUGH* 3-5-04 941-778 3006

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