## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L01000015462

1. Entity Name LIGHTHOUSE CAPITAL MANAGEMENT, LLC

FILED Mar 17, 2004 08:00 AM Secretary of State

Principal Place of Business

15 SHADY LANE TEQUESTA, FL 33469 Mailing Address

15 SHADY LANE TEQUESTA, FL 33469

CR2E083 (10/03)

## DO NOT WRITE IN THIS SPACE

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

4. FEI Number 65-1132318

Applied For Not Applicable

5. Certificate of Status Desired

03092004 No Chg-LLC

\$5.00 Additional

6. Name and Address of Current Registered Agent

BROWN, GRETA J 15 SHADY LANE TEQUESTA, FL 33469

## 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 religional)	DATE
Filing Fee is \$50.00 Due by May 1, 2004			000000091182 (3/17/04-80049-014 50.00
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROWN, GRETA J 15 SHADY LANE TEQUESTA, FL 33469		_
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CRY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET AUDRESS CITY-ST-ZIP		T NI	'HIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-JIP	service service		
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.			

Brown