

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000015982

FILED
Feb 04, 2004
Secretary of State

Entity Name: COLLINS-KIEFER SEMINARS, LLC

Current Principal Place of Business:

400 GULF BREEZE PARKWAY, SUITE 205
GULF BREEZE, FL 32561

New Principal Place of Business:

400 GULF BREEZE PARKWAY, SUITE 201
GULF BREEZE, FL 32561

Current Mailing Address:

400 GULF BREEZE PARKWAY, SUITE 205
GULF BREEZE, FL 32561

New Mailing Address:

400 GULF BREEZE PARKWAY, SUITE 201
GULF BREEZE, FL 32561

FEI Number: 59-3746071

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, DAVID L
400 GULF BREEZE PARKWAY, SUITE 205
GULF BREEZE, FL 32561

Name and Address of New Registered Agent:

COLLINS, DAVID L
400 GULF BREEZE PARKWAY, SUITE 201
GULF BREEZE, FL 32561

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:

02/04/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: COLLINS, DAVID L
Address: 400 GULF BREEZE PARKWAY, SUITE 205
City-St-Zip: GULF BREEZE, FL 32561

Title: MGRM () Delete
Name: KIEFER, BRYAN J
Address: 400 GULF BREEZE PARKWAY, SUITE 205
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLLINS, DAVID L
Address: 400 GULF BREEZE PARKWAY, SUITE 201
City-St-Zip: GULF BREEZE, FL 32561

Title: MGRM (X) Change () Addition
Name: KIEFER, BRYAN J
Address: 400 GULF BREEZE PARKWAY, SUITE 201
City-St-Zip: GULF BREEZE, FL 32561

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: DAVID L. COLLINS

MGMR

02/04/2004

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