

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019033

**FILED**  
**Feb 04, 2004**  
**Secretary of State**

**Entity Name:** CHARITABLE GIVING RESOURCE CENTER, LLC

**Current Principal Place of Business:**

453 N. KIRKMAN ROAD, SUITE 101  
ORLANDO, FL 32811

**New Principal Place of Business:**

453 N. KIRKMAN ROAD  
SUITE 101  
ORLANDO, FL 32811

**Current Mailing Address:**

453 N. KIRKMAN ROAD, SUITE 101  
ORLANDO, FL 32811

**New Mailing Address:**

453 N. KIRKMAN ROAD  
SUITE 101  
ORLANDO, FL 32811

FEI Number: 59-3760854

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RAWLS, LOYD H  
453 N. KIRKMAN ROAD, SUITE 101  
ORLANDO, FL 32811

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

RAWLS, LOYD H  
453 N. KIRKMAN ROAD  
SUITE 101  
ORLANDO, FL 32811

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: LOYD H RAWLS

02/04/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: RANTS, LOYD H  
Address: 453 N KIRKMAN RD #101  
City-St-Zip: ORLANDO, FL 32811

Title: MGR ( ) Delete  
Name: DOUDAH, DONALD  
Address: 453 N KIRKMAN RD #101  
City-St-Zip: ORLANDO, FL 32811

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RAWLS, LOYD H  
Address: 453 N KIRKMAN RD #101  
City-St-Zip: ORLANDO, FL 32811

Title: MGR (X) Change ( ) Addition  
Name: DOUDNA, DONALD J  
Address: 453 N KIRKMAN RD #101  
City-St-Zip: ORLANDO, FL 32811

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: LOYD H RAWLS

MGR

02/04/2004

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