

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021254

FILED
May 03, 2004
Secretary of State

Entity Name: CANDY CRUNCHERS LLC

Current Principal Place of Business:

1929 OLIVE AVENUE
SEBRING, FL 33870 US

New Principal Place of Business:

1369 FORT TAYLOR CT
KEY WEST, FL 33040 US

Current Mailing Address:

1929 OLIVE AVENUE
SEBRING, FL 33870 US

New Mailing Address:

1369 FORT TAYLOR CT
KEY WEST, FL 33040 US

FEI Number: 65-1157755

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCLAY, KIM
1929 OLIVE AVENUE
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

MCLAY, KIM
1369 FORT TAYLOR CT
KEY WEST, FL 33040 US

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:

05/03/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: MCLAY, KIM
Address: 1929 OLIVE AVENUE
City-St-Zip: SEBRING, FL 33870

Title: S () Delete
Name: MCLAY, PAT
Address: 1929 OLIVE AVENUE
City-St-Zip: SEBRING, FL 33870

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MCLAY, KIM
Address: 1369 FORT TAYLOR CT
City-St-Zip: KEY WEST, FL 33040

Title: MGR (X) Change () Addition
Name: MCLAY, PAT
Address: 1369 FORT TAYLOR CT
City-St-Zip: KEY WEST, FL 33040

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: KIM MCLAY

MGR

05/03/2004

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