

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 07, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000001154 1. Entity Name THE MERLIN COMPANY, LLC	
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Principal Place of Business 711 W. HARVARD STREET ORLANDO, FL 32804	Mailing Address 711 W. HARVARD STREET ORLANDO, FL 32804
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent MERLIN, DOUGLAS J 711 W HARVARD STREET ORLANDO, FL 32804
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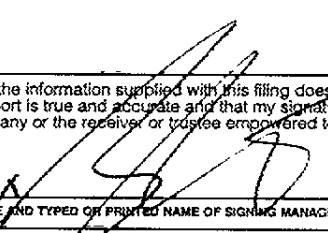
	
02192004 No Chg-LLC	CR2E083 (10/03)
4. FEI Number 04-3594393	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

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.	DATE _____ (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2004	U000000105609 04/07/04-80032-016 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERLIN, DOUGLAS J 711 W. HARVARD STREET ORLANDO, FL 32804
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 606, Florida Statutes.	
SIGNATURE: 	4-5-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE	Date Daytime Phone #