2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 01, 2004
Secretary of State

DOCUMENT# L02000004994

Entity Name: DAVID H. SHEPHERD, L.L.C.

Current Principal Place of Business:

5849 SARATOGA DR
CRESTVIEW, FL 32536

New Principal Place of Business:

Current Mailing Address:

5849 SARATOGA DR
CRESTVIEW, FL 32536

New Mailing Address:

FEI Number: 04-3628269 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SHEPHERD, DAVID H
5849 SARATOGA DR
CRESTVIEW, FL 32536

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: SHEPHERD, DAVID MANAGER
Address: 5849 SARATOGA DRIVE
City-St-Zip: CRESTVIEW, FL 32536 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGR ( ) Change (X) Addition
Name: SHEPHERD, CECILIA A MANAGER
Address: 5849 SARATOGA DRIVE
City-St-Zip: CRESTVIEW, FL 32536 US

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: CECILIA A. SHEPHERD MGR 04/01/2004

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