

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000005687

1. Entity Name
ZILLA, LLC



Principal Place of Business

4265 ELDRIDGE LOOP
ORANGE PARK, FL 32073 US

Mailing Address

5053 CHARLEMAGNE RD
JACKSONVILLE, FL 32210 US



01262004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

71-0869552

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZILLA, CHARLES C
5053 CHARLEMAGNE RD
JACKSONVILLE, FL 32210

**DO NOT WRITE
IN THIS SPACE**

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
ZILLA, LAVERN C
4212 FLEET LANDING BLVD.
ATLANTIC BEACH, FL 32233

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MGRM
ZILLA, CHARLES C
5053 CHARLEMAGNE RD.
JACKSONVILLE, FL 32210

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
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CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

01/29/04-80035-011 \$0.00

11. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Day/16 Phone #

Charles C. Zilla

1-24-04

9042090689