## 2004 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

	AMENDED ANN	IUAL REPOI	KT				
DOCUMENT # L02000005765					04 FEB 19 AH 10:31	-	
1. Entity Name 721 U.Ş. HWY 1, L.L.C.					TATLAHASSEE FLORIDA		
	I.D. views	Mailing Adgress		WED!	•	MJ	
Principal Place of Business Mailing Address 721 U.S. HWY 1, #215 721 U.S. HWY 1, #215 NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408				08			
2 Principal P	loca of Business	3. Mailing Address			-		
2. Principal Place of Business						 	
Suite, Apr #, etc		Suite, Apt. #. etc.			02022004 Chg-LLC CR2E083 (10/03)	<u> </u>	
City & State		City & State			4. FEI Number Applied F 01-0680824 Not Applied F		
Zip Country		Zip Country		rtrγ	5. Certificate of Status Desired S5.00 Additional Fee Required		
	6. Name and Address of Current i	Registered Agent			7. Name and Address of New Registered Agent		
WANTLAND, CALVIN A				Name			
721 U.S. HWY 1, #215 NORTH PALM BEACH, FL 33408				Street Address (P.O. Box Number is Not Acceptable)			
				City	Zip Code	—	
9 The show	named antity submits this statement for	the autoose of changing is	reniste		FL   Zip Code lered agent, or both, in the State of Florida. I am familiar with, and ac	rent	
	tions of registered agent	tre harbose or citariging he	. regisiei	ied onice of regisk	and agent, or contract in the state of crosses. I arrest that with and as	~ep	
SIGNAȚURE	Signature: Typed or present name of registered agent a	natele / applicable. (NOT	E. Regaten	id Agent ingressive require	PATE CASE	-	
					Make check payable to		
A	mended AR is \$50.00				Florida Department of State		
9.	MANAGING MEMBE	RS/MANAGERS	10.		ADDITIONS/CHANGES		
TO FLE NAME	MGRM MCNEEE, WILLIAM P III	☐ Delete	TIT! KAI	1	U00000035077	valdition	
STREET ADDRESS CITY-SI-ZIP	721 U.S. HWY 1, #215	<b>o</b>	SIR	REET ADORESS Y-ST-ZIP	02/05/04-80104-026 50.00	)	
nas	MGRM	Delete	. 60		☐ Change ☐ A	Addition	
KAME STREET ADDRESS	WANTLAND, CALVIN A 721 U.S. HWY 1, #215		iah 172	ME. NEET ADORESS			
CITY-ST-ZP	NORTH PALM BEACH, FL 3340	8		Y-SI-DP			
Isfee NAME		☐ Delete	T(E NAI		☐ Charge ☐ A	Addition	
STREET ADORESS			SIT	TEET ADDRESS			
RITLE		☐ Delete	THE	Y-\$T-ZIP LE	☐ Change ☐ A	kidition	
KAME CIDEST LODASSES			NA CTT			1	
STREET ADDRESS CITY-ST-7#				NEET ADORESS Y-ST-ZIP			
TIFLE		☐ Colete	163		Change A	Addition	
STREET ADDRESS			na Sti	REET ADORESS	•	ŀ	
CHY-ST-ZP BILE		FT Action		Y-\$1-2\P	50h 51-	elelista a	
KAME		☐ Delese	THE HA		☐ Change ☐ A	Addition	
STREET ADORESS CITY-ST-ZP				RHT ADDRESS Y-ST-ZIP		}	
11. I hereby	certify that the information supplied with	this filing does not qualify fr	or the ex	emption stated in 5	Section 119.07(3)(i), Florida Statutes Thirther certify that the informa	tion	
indicated	d on this report is true and accurate and ability company or the receiver or truster	that my signature shall have	the san	ne legal effect as if	if made under oath, that I am a managing member or manager of th	e [	
					2/2 hu <6/-901-16	ا بر	
CLCRIAT	CLIDE:				######################################		

GRE AND TYPED OR PROTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE