


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004 08:00 AM
Secretary of State


DOCUMENT # L02000009272

1. Entity Name
FIRST TAMPA HARBOR GROVE, LLC



Principal Place of Business 1525 WEST HILLSBOROUGH AVENUE TAMPA, FL 33603	Mailing Address 1525 WEST HILLSBOROUGH AVENUE TAMPA, FL 33603
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DO NOT WRITE IN THIS SPACE



03032004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 93-1965296	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**REIBER, SAM I ESQ
 601 E. TWIGGS ST., SUITE 200
 TAMPA, FL 33602**

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 _____ DATE _____
(Signature: typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when renouncing)

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

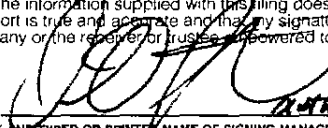
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY ST ZIP	P ARTZIBUSHEV, DIMITRI 1525 W HILLSBOROUGH AVE TAMPA, FL 33603
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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)(j), 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, or empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  **DIMITRI ARTZIBUSHEV** **4/28/04** **813-237-0529**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #