

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**

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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 _____
(NOTE: Registered Agent signature required when reappointing)

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

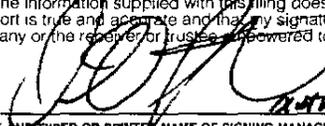
9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY ST ZIP	P ARTZIBUSHEV, DIMITRI 1525 W HILLSBOROUGH AVE TAMPA, FL 33603
TITLE NAME STREET ADDRESS CITY ST ZIP	

007000137210
 04/29/04-80030-018 50.00

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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** **4/23/04** **813-237-0529**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #