

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000011224

Entity Name: QUINN ASSOCIATES, LLC

FILED  
Mar 29, 2004  
Secretary of State

## Current Principal Place of Business:

309 NORTH HOWARD AVE  
TAMPA, FL 33606

## New Principal Place of Business:

## Current Mailing Address:

309 NORTH HOWARD AVE  
TAMPA, FL 33606

## New Mailing Address:

FEI Number: 59-2738564

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

QUINN, COLLEEN  
309 N. HOWARD AVE  
TAMPA, FL 33606

## Name and Address of New Registered Agent:

QUINN, PAUL  
309 N. HOWARD AVE  
TAMPA, FL 33606

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: PAUL QUINN

03/29/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: QUINN, PAUL A SR  
Address: 309 N HOWARD AVE  
City-St-Zip: TAMPA, FL 33606

Title: MGRM (X) Delete  
Name: QUINN, COLLEEN  
Address: 309 N HOWARD AVE  
City-St-Zip: TAMPA, FL 33606

## ADDITIONS/CHANGES:

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

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

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: PAUL QUINN

MGRM

03/29/2004

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