

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015837

FILED  
Jul 28, 2004  
Secretary of State

**Entity Name:** NORTH GARDEN ASSOCIATES, LLC

**Current Principal Place of Business:**

100 ELDORADO AVE  
CLEARWATER, FL 33767

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 902  
CLEARWATER, FL 33757

**New Mailing Address:**

P.O. BOX 1558  
CLEARWATER, FL 33757

**FEI Number:** 34-2004041

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

POLLACK, RONALD J  
1000 ELDORADO AVE  
CLEARWATER, FL 33767

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: POLLACK, RONALD J  
Address: 1000 ELDORADO AVE  
City-St-Zip: CLEARWATER, FL 33767

Title: MGR ( ) Delete  
Name: POLLACK, MIREILLE  
Address: 1000 ELDORADO AVE  
City-St-Zip: CLEARWATER, FL 33767

**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: RONALD POLLACK

MR.

07/28/2004

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