2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 07, 2004
Secretary of State

DOCUMENT# L02000017345

Entity Name: LT FARM, L.L.C.

Current Principal Place of Business:

4427 EMERSON STREET, BUILDING 2
JACKSONVILLE, FL 32207

New Principal Place of Business:

4626 RIVER POINT RD W
JACKSONVILLE, FL 32207

Current Mailing Address:

P.O. BOX 551260
JACKSONVILLE, FL 32255

New Mailing Address:

4626 RIVER POINT RD W
JACKSONVILLE, FL 32207

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHNEIDER, MICHAEL N
5150 BELFORT ROAD
BUILDING 100
JACKSONVILLE, FL 32256 US

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: MGRM ( ) Delete
Name: BLACK, LOUIS E
Address: 4427 EMERSON STREET, BUILDING 2
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BLACK, LOUIS E
Address: 4626 RIVER POINT RD W
City-St-Zip: JACKSONVILLE, FL 32207

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: LOUIS E. BLACK MGRM 04/07/2004

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