

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017363

FILED
Jul 06, 2004
Secretary of State

Entity Name: BREAKAWAY, L.L.C.

Current Principal Place of Business:

325 JOHN KNOX ROAD, BLDG. F, SUITE 104
TALLAHASSEE, FL 32303

New Principal Place of Business:

Current Mailing Address:

325 JOHN KNOX ROAD, BLDG. F, SUITE 104
TALLAHASSEE, FL 32303

New Mailing Address:

FEI Number: 30-0093490

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARDUE, CAROLYN R
325 JOHN KNOX ROAD, BLDG. F, SUITE 104
TALLAHASSEE, FL 32303

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: RENNICK, VERNA
Address: 110 BURKS LN
City-St-Zip: TALLAHASSEE, FL 32304

Title: MGRM () Delete
Name: PARDUE, CAROLYN
Address: 809 MADERIA CN
City-St-Zip: TALLAHASSEE, FL 32312

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: CAROLYN R. PARDUE

MGR

07/06/2004

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