


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 16, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000017576 1. Entity Name 205 N. PARROT AVE. HOLDINGS, LLC	
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Principal Place of Business 6601 PAMELA LANE WEST PALM BEACH, FL 33405	Mailing Address P.O. BOX 2550 WEST PALM BEACH, FL 33402
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DO NOT WRITE IN THIS SPACE



02122004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-0934890	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 CLARK, HARPER A JR 6601 PAMELA AVE WEST PALM BEACH, FL 33403	DO NOT WRITE IN THIS SPACE
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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

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

000000053846
02/16/04 00140 005 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CLARK HOLDING COMPANY 6601 PAMELA LANE WEST PALM BEACH, FL 33405
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Harper A. Clark* **2/12/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #