

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018552

FILED
Jan 21, 2004
Secretary of State

Entity Name: SURFSIDE ASSOCIATES, LLC

Current Principal Place of Business:

THE KRESS BUILDING, SUITE M-8
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

C/O ERNEST L. MASCARA, PA
475 CENTRAL AVENUE, SUITE M-8
ST. PETERSBURG, FL 33701 US

New Mailing Address:

FEI Number: 38-3665734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASCARA, ERNEST L
THE KRESS BUILDING, SUITE M-8
475 CENTRAL AVENUE
ST. PETERSBURG, FL 33701 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: LEWISON, GARY L
Address: 475 CENTRAL AVENUE, SUITE M-8
City-St-Zip: ST. PETERSBURG, FL 33701 US

Title: MGRM () Delete
Name: MASCARA, ERNEST L
Address: 475 CENTRAL AVENUE, SUITE M-8
City-St-Zip: ST. PETERSBURG, FL 33701 US

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: GARY L. LEWISON

MGRM

01/21/2004

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