2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000020202

Entity Name: INTREPID HOLDINGS, LLC

JOHNSON, TODD C

225 WATER STREET, SUITE 2020

JACKSONVILLE, FL 32202

Name:

Address:

City-St-Zip:

FILED Apr 09, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 225 WATER STREET 2020 JACKSONVILLE, FL 32202 **New Mailing Address: Current Mailing Address:** 225 WATER STREET 2020 JACKSONVILLE, FL 32202 FEI Number: 04-3709822 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INTREPID REGISTERED AGENT SERVICES, LLC 225 WATER STREET 2020 JACKSONVILLE, FL 32202 US 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: ADDITIONS/CHANGES:** MGR () Change () Addition () Delete MCAFEE, MATTHEW S Name: Name: 225 WATER STREET, SUITE 2020 Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: () Delete Title: MGR Title: () Change () Addition BROCKWELL, PAUL H Name: Name: Address: 4741 ATLANTIC BOULEVARD, SUITE D Address: City-St-Zip: JACKSONVILLE, FL 32207 City-St-Zip: Title: MGR () Delete Title: () Change () Addition CAMERLENGO, JOSEPH V Name: Name: 4741 ATLANTIC BOULEVARD, SUITE D Address: Address: City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: Title: MGR () Delete Title: () Change () Addition DRIVER, GARY R JR. Name: Name: 225 WATER STREET, SUITE 2020 Address: Address: City-St-Zip: JACKSONVILLE, FL 32202 City-St-Zip: Title: MGR (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: G. RAY DRIVER, JR. MGR 04/09/2004