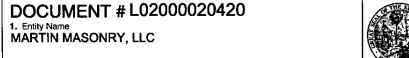
2004 LIMITED LIABILITY COMPANY ANNUAL REPORT





FILED Feb 17, 2004 8:00 am Secretary of State 02-17-2004 90197 003 ****50.00

1. Entity Nam MARTIN I	e MASONR	RY, LLC						0 2 1. 2 00			, 0100	
Principal Place 1440 NOVA I SUITE 301 HOLLY HILL,	ROAD	S	Mailing Address 1440 NOVA ROAD SUITE 301 HOLLY HILL, FL 32117				l isəlitəsi bir	ATUR ITAN BRIN BRIN BR	IA OTITO (10): BOIII 9		EET III 1201	
2. Principal P	lace of Busin	ess	3. Mailing Address									
Suite, Apt.	#, etc.	- ···	Suite, Apt. #, etc.				01192004	Chg-LLC	CR2E083	(10/03)		
City & State	e		City & State				4. FEI Numbe	PPLICABLE			plied For t Applicable	
Zip	ip Country		Zip Co		untry		_5. Certificate	of Status Desired		.00 Add		
	5. Name	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent							
MARTIN, DOUGLAS 1440 NOVA ROAD Street						Richard K. Martin Address (P.O. Box Number is Not Acceptable)						
SUITE 301		الباد	40	to Nove Road Snite 301								
						City Holland Male FL Zip.Code						
	named entity	y submits this statement for	r the purpose of changir	ng its register	ed office or r	register	agent, or bo	th, in the State of Fi	orida. I am fan	niliar with,	and accept	
SIGNATURE.	Signature, typed	houl Mison or printed name of registered agent	and title if applicable.	(NOTE: Registere	d Agent signature	NU Deniuper e	artin when reinstating)	1/201	O C DATE :	1 * * *	10. 4	
				** , * **	77.3			men er i sagara on tre de				
Filing Fee is \$50.00 Due by May 1, 2004									е check pay a Departmen			
9.		MANAGING MEMBE	RS/MANAGERS	10.				ADDITIONS	/CHANGES	·	***	
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TITLE	P HOLLY H	ILL, FL 32117	DZ Delete	CITY	-ST-ZIP	The	eng H	ue, or	32117	7 Change	Addition	
NAME	MARTIN,	RICHARD K		· · · NAM		٠	- -		L	_ · · · —	Audition	
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NAME	1.5544		— celeté	NAM		- '				i. oùmiñe .	- Analdon	
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS '-ST-ZIP							
	certify that th	e information supplied with	this filing does not qual			ed in See	ation 119.07/3)	i) Florida Statutes	I further certify	that the in	formation	
) indicated	l on this repo	e information supplied with rt is true and accurate and ny or the receiver or truste	l that my signature shall l	have the same	e legal effect	tas if m	ade under oath	i; that I am a mana	I further certify ging member o	that the in r manage	formation r of the	