


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
May 10, 2004 8:00 am
Secretary of State

04-23-2004 90022 037 ****50.00

DOCUMENT # L02000020799	
1. Entity Name PAT'S PORCH, ART, ANTIQUES & INTERIORS MARKET, LLC	

Principal Place of Business 196 N. HOLIDAY ROAD MIRAMAR BEACH FL 32550	Mailing Address 196 N. HOLIDAY ROAD MIRAMAR BEACH FL 32550
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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6. Name and Address of Current Registered Agent

FISHER, PAT T 196 N. HOLIDAY ROAD MIRAMAR BEACH FL 32550

4. FEI Number 59-3599	Applied For APPLIED FOR 909	Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL
Zip Code

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	DATE
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FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004
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9. MANAGING MEMBERS / MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FISHER, PAT T 196 N. HOLIDAY ROAD MIRAMAR BEACH FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM STILLIONS, PATRICIA M 1100 BAY COURT DESTIN FL 32541
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CYATHA K. NAWMAAN 808 NORWOOD DR MIRAMAR BEACH, FL 32550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Pat T. Fisher	Date: 4/20-2004	Daytime Phone #: 930-600-1953
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59-3599 / 34005514


MOORE CR2E083 (11/03)