

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90068 005 ****55.00

DOCUMENT # L02000021134

1. Entity Name
PENSACOLA STAKEHOLDERS, L.L.C.



Principal Place of Business
**316 SOUTH BAYLEN ST., STE. 300
PENSACOLA, FL 32501**

Mailing Address
**316 SOUTH BAYLEN ST., STE. 300
PENSACOLA, FL 32501**

24059346



2. Principal Place of Business
**449 West Main Street
Suite, Apt. #, etc.**

3. Mailing Address
**449 West Main Street
Suite, Apt. #, etc.**

04222004 Chg-LLC CR2E083 (10/03)

City & State
Pensacola, FL

City & State
Pensacola FL

4. FEI Number
04-3740922

Applied For
☐ Not Applicable

Zip
32502

Country

Zip
32502

Country

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BOWYER, LARRY M
316 SOUTH BAYLEN ST., STE. 300
PENSACOLA, FL 32501**

7. Name and Address of New Registered Agent

Name
Larry M. Bowyer

Street Address (P.O. Box Number is Not Acceptable)
449 West Main Street

City
Pensacola

FL

Zip Code
32502

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
BOWYER, LARRY M
316 SOUTH BAYLEN ST., STE. 300
PENSACOLA, FL 32501** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
DONOVAN, FRED C SR.
316 SOUTH BAYLEN ST., STE. 300
PENSACOLA, FL 32501** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
449 West Main Street
Pensacola FL 32502** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRM
449 West Main Street
Pensacola FL 32502** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

04/26/04

Date

(850) 438-9661

Daytime Phone #