2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L02000021290

JY TARPON PROPERTIES, LLC

FILED Apr 21, 2004 08:00 AM_ Secretary of State

Principal Place of Business

Mailing Address

5453 CENTRAL AVE.

ST. PETERSBURG, FL 33710

P.O. BOX 4192 ST. PETERSBURG, FL 33710



01192004 No Chg-LLC

CR2E083 (10/03)

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	- 75	5-6683C	3DZ

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HINES, JAMES P 315 S. HYDE PARK AVE. TAMPA, FL 33606

9.

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 The above named entity submits this statement for the purpose of che the obligations of registered agent. 	anging its registere	ed office or registered agent,	or both, in the State of	Florida. I am familia	with, and accept
SIGNATURE Signature, typod or printed name of registered agent and title of applicable.	(NOTF: Registeres	d Agent signature required when reinstall	ing)	DATE	
Filing Fee is \$50.00 Due by May 1, 2004					

MGRM HILE YANCHUCK, JOEL P NAME STREET ADDRESS PO BOX 4192 COLY-ST-33P ST. PETERSBURG, FL 337314192 me NAME STREET ADDRESS CXIV-SI-ZIP TITLE NAME STREET ADDRESS CTTY'-ST-ZIP me NAME STREET ADDRESS CTTY-ST-ZIP 1135 € NAME STREET ADDRESS CITY-ST-ZIP me NAME

MANAGING MEMBERS/MANAGERS

U00000122679 04/21/04-80038-024 50.00

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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 accordate 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 flability company or the receiver or trustee expowered to execute this papert as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CHY-ST-ZIP

> ER, OR AUTHORIZED REPRESENTATIVE SIGNATURE AND TYPED OR PRINTED HAME OF SIG