


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Sep 23, 2004 8:00 am
Secretary of State

9/9/

09-09-2004 90073 024 ***150.00

DOCUMENT # L02000022087 1. Entity Name MCCOY GAMING, LLC	
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Principal Place of Business 9200 OAK ISLAND LANE CLERMONT, FL 34711	Mailing Address 9200 OAK ISLAND LANE CLERMONT, FL 34711
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34010000



DO NOT WRITE IN THIS SPACE

07202004 No Chg-LLC

CP2E083 (10/03)

4. FEI Number 59-3474791	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

8. Name and Address of Current Registered Agent APPLEBY, HOMER P 3245 SAINT JAMES DR. BOCA RATON, FL 33434
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**DO NOT WRITE
IN THIS SPACE**

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 *Homer P. Appleby* 8-6-04
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 September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOY, ANTHONY 9200 OAK ISLAND LANE CLERMONT, FL 34711
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCCOY, JODIE 9200 OAK ISLAND LANE CLERMONT, FL 34711
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**DO NOT WRITE
IN THIS SPACE**

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: *Anthony B. McCoy*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

9-20-04 352-636-6391
Date Daytime Phone #



Attachment
34016529

FLORIDA DEPARTMENT OF STATE

Glenda E. Hood

Secretary of State

September 10, 2004

MCCOY GAMING, LLC
9200 OAK ISLAND LANE
CLERMONT, FL 34711

Subject: MCCOY GAMING, LLC

Reference Number: L02000022087

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The annual report/uniform business report must be signed by a managing member, manager or an authorized representative of the limited liability company.

**TO AVOID THE ADMINISTRATIVE DISSOLUTION/REVOCATION,
PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF
CORPORATIONS, P.O. BOX 6478, TALLAHASSEE, FLORIDA 32314
WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION