2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

FILED Feb 04, 2004 08:00 AM DOCUMENT # L02000024572 Secretary of State CINCO, LLC Mailing Address Principal Place of Business 516 KELLY STREET 516 KELLY STREET DESTIN, FL 32541 DESTIN, FL 32541 CR2E083 (10/03) 02022004No Chg-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEt Number 75-3096265 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent READY, FRANK W DO NOT WRITE **516 KELLY STREET** IN THIS SPACE DESTIN, FL 32541 3. 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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. MGR MIL NATE READY, FRANK W STREET ADDRESS **516 KELLY STREET** U00000035584 CITY-ST-ZIP DESTIN, FL 32541 02/06/04-80023-017 50.00 TITLE MGR MAJORS, BARBARA NAME 115 EDWARDS LANE STREET ADDRESS FORT WALTON BEACH, FL 32548 CITY-ST-ZIP TELLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE:

11. 1 hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same logal 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.