

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000024753

FILED
May 13, 2004
Secretary of State

Entity Name: TRANS GULF FINANCIAL LLC

Current Principal Place of Business:

630 CHARLES CARROLL STREET
ORANGE PARK, FL 32073

New Principal Place of Business:

7545 CASTLE DRIVE
SARASOTA, FL 34240

Current Mailing Address:

630 CHARLES CARROLL STREET
ORANGE PARK, FL 32073

New Mailing Address:

7545 CASTLE DRIVE
SARASOTA, FL 34240

FEI Number: 20-1118641

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

RASMUSSEN, BILLIE J MS.
7545 CASTLE DRIVE
SARASOTA, FL 34240 US

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.

SIGNATURE: BILLIE J. RASMUSSEN

05/13/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: SHELL, LAURA A
Address: 630 CHARLES CARROLL STREET
City-St-Zip: ORANGE PARK, FL 32073

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SHELL, LAURA A
Address: 630 CHARLES CARROLL STREET
City-St-Zip: ORANGE PARK, FL 32073

Title: MGRM () Change (X) Addition
Name: RASMUSSEN, TOM
Address: 7545 CASTLE DRIVE
City-St-Zip: SARASOTA, FL 34240

Title: MGRM () Change (X) Addition
Name: RASMUSSEN, BILLIE J
Address: 7545 CASTLE DRIVE
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: TOM RASMUSSEN

MGRM

05/13/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date