2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# L02000024759

Entity Name: BACK PORCH VENTURES, L.L.C.

Current Principal Place of Business:

315 S.E. ST. LUCIE BOULEVARD
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

315 S.E. ST. LUCIE BOULEVARD
STUART, FL 34996

New Mailing Address:

FEI Number: 61-1426410 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOWERS, JEFFREY A
315 S.E. ST. LUCIE BOULEVARD
STUART, FL 34996 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete
Name: BOWERS, JEFFERY A
Address: 315 S.E. ST. LUCIE BLVD.
City-St-Zip: STUART, FL 34996

Title: MGRM ( ) Delete
Name: CORSON, MARK A
Address: 2637 N.E. SABLE PALM WAY
City-St-Zip: JENSEN BEACH, FL 34957

Title: MGRM ( ) Delete
Name: OSTEEN, WILLIAM D JR
Address: 4743 S.W. BERMUDA WAY
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: OSTEEN, WILLIAM D JR
Address: 17 VIA LUCINDIA S.
City-St-Zip: STUART, FL 34996

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: JEFFERY A BOWERS MGRM 04/29/2004

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