2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L02000025212

1. Entity Name
PRAM, LLC

Principal Place of Business	Mailing Address
17669 FIELDBROOK CIRCLE NORTH BOCA RATON, FL 33496	17669 FIELDBROOK CIRCLE NORTH BOCA RATON, FL 33496

DO NOT WRITE IN THIS SPACE

24081354

08162004 No Chg-LLC   CR2E083 (10/03)

4. FEI Number	Applied For
56-2302086	Not Applicable

5. Certificate of Status Desired   ☐   **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

FOX, LEO A
133 BOCA RATON ROAD
BOCA RATON, FL 33432

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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_____

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	MGRM	
NAME	WHEELER, C. DOUGLAS	
STREET ADDRESS	17669 FIELDBROOK CIRCLE NORTH	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE	MGRM	
NAME	WHEELER, MARY A	
STREET ADDRESS	17669 FIELDBROOK CIRCLE NORTH	
CITY-ST-ZIP	BOCA RATON, FL 33496	
TITLE		
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CITY-ST-ZIP		

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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 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: _____   8-19-2004   (561) 998-2222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #