

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000026511

Entity Name: C & R OF FLORIDA, LLC

FILED
Jan 15, 2004
Secretary of State

Current Principal Place of Business:

8805 TAMIAMI TRAIL NORTH, #162
NAPLES, FL 34108

New Principal Place of Business:

Current Mailing Address:

8805 TAMIAMI TRAIL NORTH, #162
NAPLES, FL 34108

New Mailing Address:

FEI Number: 42-1559606

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAME YEAGER CHEFFY
2375 TAMIAMI TRAIL NORTH, SUITE 310
NAPLES, FL 34103 US

Name and Address of New Registered Agent:

JANE YEAGER CHEFFY
2375 TAMIAMI TRAIL NORTH, SUITE 310
NAPLES, FL 34103 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: JANE YEAGER CHEFFY

01/15/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: P () Delete
Name: ROBBINS, DAVID
Address: 8805 TAMIAMI TRAIL N. #162
City-St-Zip: NAPLES, FL 34108

Title: VP () Delete
Name: CHAVHE, ROBERT
Address: 4244 BRYNWOOD DRIVE
City-St-Zip: NAPLES, FL 34119

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ROBBINS, DAVID
Address: 8805 TAMIAMI TRAIL N. #162
City-St-Zip: NAPLES, FL 34108

Title: MGRM (X) Change () Addition
Name: CHAPHE, ROBERT
Address: 4244 BRYNWOOD DRIVE
City-St-Zip: NAPLES, FL 34119

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: DAVID ROBBINS

MGRM

01/15/2004

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