


FILED
 May 25, 2004 08:00 AM
 Secretary of State

**2004 LIMITED LIABILITY COMPANY
 ANNUAL REPORT**

DOCUMENT # L02000030395 1. Entity Name COLONIAL SUPER CARWASH, LLC	
--	---

Principal Place of Business 302 NE HANCOCK STREET MADISON, FL 32340	Mailing Address PO BOX 934 MADISON, FL 32340
--	---

DO NOT WRITE IN THIS SPACE



03062003 No Chg-LLC	CR2E063 (10/03)
4. FEI Number 41-2069674	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**DULAY, MARIA L
 302 NE HANCOCK STREET
 MADISON, FL 32340**

**DO NOT WRITE
 IN THIS SPACE**

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: *Maria L Dulay* DATE: 11/5/04

(NOTE: Registered Agent signature required when releasing)


**Filing Fee is \$50.00
 Due by September 8, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGR
NAME	DULAY, MARIA L
STREET ADDRESS	302 NE HANCOCK STREET
CITY-ST-ZIP	MADISON, FL 32340
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
 IN THIS SPACE**

U00000161473
 05/25/04-80002-004 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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 606, Florida Statutes.

 11/5/04