2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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1. Entity Nam	MENT # L02000031 PITAL HOLDINGS 2003 H, I			FIL 14 JAN 22 ECRETARY O LLAHASSEE,	ED AM 9: 12 ESTATE	?		
Principal Place 1551 SANDS MAITLAND, F		Mailing Address P.O. BOX 4961 ORŁANDO, FL 32802						
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	CAK.	01152004	Chg-LLC	CR2E083	3 (10/03)	
City & Stat	e ·	City & State	//	4. FEI Numb	er PPLICABLE		_ 	oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate	of Status Desired		5.00 Add e Require	
	6. Name and Address of Current	Registered Agent		7. Name an	Address of New	Registered Ag	ent	
B&C CORPORATE SERVICES OF CENTRAL FLORIDA			Name					
SUITE 110	· ·		Street Add	fress (P.O. Box Numb	er is Not Acceptab	le)		
ORLANDO	D, FL 32801		City			FI	Zip Code	
8. The above	named entity submits this statement fo	r the purpose of changing its r		egistered agent, or bo	ith, in the State of F	FL lorida. I am fan		
the obligat	ions of registered agent.							
SIGNATURE .								
SIGNATURE .	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature	required when reinstating)		DATE		
Fi	Signature, typed or printed name of registered agent. Illing Fee is \$50.00 ue by May 1, 2004	and title if applicable. (NOTE:	Registered Agent signature (required when reinstating)		DATE ke check pay la Departmen		
Fi	lling Fee is \$50.00		Registered Agent signature of	required when reinstating)	Florid	ke check pay la Departmen		3
Fi D	lling Fee is \$50.00 ue by May 1, 2004			required when reinstating)	Florid	ke check pay la Departmen		a Addition
9. TITLE NAME STREET ADDRESS	MANAGING MEMBE MGR BROCK, JAY P 1551 SANDSPUR ROAD MAITLAND, FL 32751 MGR GINSBURG, ALAN H	RS/MANAGERS	10. TITLE NAME STREET ADDRESS	required when reinstating)	Florid	ke check pay la Departmen S/CHANGES	t of State	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGR BROCK, JAY P 1551 SANDSPUR ROAD MAITLAND, FL 32751 MGR GINSBURG, ALAN H 1551 SANDSPUR ROAD	RS/MANAGERS	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		Florid	ke check pay la Departmen	Change Change	Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MEMBE MGR BROCK, JAY P 1551 SANDSPUR ROAD MAITLAND, FL 32751 MGR GINSBURG, ALAN H 1551 SANDSPUR ROAD MAITLAND, FL 32751 MGR SCIARRINO, MICHAEL J 1551 SANDSPUR ROAD	RS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS		ADDITIONS	ke check pay la Departmen CHANGES	Change Change	Addition
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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:

407-741-8500