2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2004
Secretary of State

DOCUMENT# L02000033181

Entity Name: SUMMERFIELD ASSOCIATES LLC

Current Principal Place of Business:

3494 U.S. HWY. 301 NORTH
COLEMAN, FL 33521

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 98
COLEMAN, FL 33521

New Mailing Address:

FEI Number: 14-1866579 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARCHBANKS, LAWRENCE J
110 CLEVELAND AVENUE
WILDWOOD, FL 34785 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: NASH, JAMES C
Address: 15351 SE 47TH AVENUE
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGRM ( ) Delete
Name: NASH, GEORGE J
Address: 15241 SE 47TH AVENUE
City-St-Zip: SUMMERFIELD, FL 34491

Title: MGRM ( ) Delete
Name: MEARS, DAVID J III
Address: 3100 E. HWY. 316
City-St-Zip: CITRA, FL 32113

ADDITIONS/CHANGES:

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

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

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

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: JAMES C. NASH MGRM 01/07/2004

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