2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L02000033673

1. Entity Name BLUM PROPERTIES, LLC



Principal Place of Business

101 ANN STREET, SUITE 301 KEY WEST, FL 33040

Mailing Address

101 ANN STREET, SUITE 301 KEY WEST, FL 33040

FILED Jul 20, 2004 08:00 AM **Secretary of State**



07122004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 43-7987149

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPOTTSWOOD, JOHN M 500 FLEMING STREET KEY WEST, FL 33040

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 The above named entity submits this statement for the purpose of cha the obligations of registered agent. 	anging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed hance of registered agent and title if applicable.	(NOTE: Registered Agent signature required whon reinstating)	DATE
Filing Fee is \$50.00 Due by September 8, 2004		

MANAGING MEMBERS/MANAGERS ٩. MGR TITLE BLUM, GARY M NAME STREET ADDRESS 101 ANN STREET, SUITE 301 CITY-ST-ZIP KEY WEST, FL 33040 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/P

#100000167375 U7/2U704-80001-023 55.00

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STREET ADDRESS 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 hability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes.

SIGNATURÉ

TITLE NAME STREET ADDRESS CETY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

RINTED NAME OF SIGNING MANAGING MEMBER.

R AUTHORIZED REPRESENTATIVE