

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000034329

FILED
Jan 29, 2004
Secretary of State

Entity Name: MANATEE OUTDOOR SPORTS L.L.C.

Current Principal Place of Business:

2231 14TH STREET WEST
BRADENTON, FL 34205

New Principal Place of Business:

2231 14TH STREET WEST
BRADENTON, FL 34205 US

Current Mailing Address:

2231 14TH STREET WEST
BRADENTON, FL 34205

New Mailing Address:

2231 14TH STREET WEST
BRADENTON, FL 34205 US

FEI Number: 65-0743977

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNGBLOOD, HOMER C
2231 14TH STREET WEST
BRADENTON, FL 34205

Name and Address of New Registered Agent:

YOUNGBLOOD, HOMER C PRES
2231 14TH STREET WEST
BRADENTON, FL 34205 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: HOMER C. YOUNGBLOOD

01/29/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: YOUNGBLOOD, HOMER C
Address: 2231 14TH STREET WEST
City-St-Zip: BRADENTON, FL 34205 US

Title: MGR () Delete
Name: YOUNGBLOOD, LINDA K
Address: 2231 14TH STREET WEST
City-St-Zip: BRADENTON, FL 34205 US

ADDITIONS/CHANGES:

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: HOMER C. YOUNGBLOOD

MGR

01/29/2004

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