## 2004 LIMITED LIABILITY COMPANY **ANNUAL REPORT**

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7/2

## FILED Jan 09, 2004 08:00 AM Secretary of State DOCUMENT # L02000034802 ROYAL PALM HOMES LLC Principal Place of Business Mailing Address 3442 BROOKLINEDR. 3442 BROOKLINEDR. SARASOTA, FL 34239 SARASOTA, FL 34239 01062004No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 14-1863552 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WOOTEN, NEIL T DO NOT WRITE 3442 BROOKLINEDR SARASOTA, FL 34239 IN THIS SPACE a. 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 ACIT WOOTEN Signature, typed or printed name of registered agent and title if applicable Filing Fee is \$50.00 Due by May 1, 2004 9. MANAGING MEMBERS/MANAGERS MGR BBE NAME WOOTEN, RON STREET ADDRESS 3442 BROOKLINEDR. U000000001246 CHY-SI-ZIP SARASOTA, FL 34239 01/05/04-80033-020 50.00 TITLE RANT. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CMY-ST-ZIP TITLE IN THIS SPACE MAME STREET ADDRESS CHY-ST-ZP MLE NAME

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(5), 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: BONALL DOOTEN	Conwolin	01-06-04	371-6721
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date	Day@me Phone #