

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000003764

FILED  
Mar 17, 2004  
Secretary of State

Entity Name: HALF SHELL RAW BAR, LLC

## Current Principal Place of Business:

6 ALLAMANDA TERRACE  
KEY WEST, FL 33040

## New Principal Place of Business:

## Current Mailing Address:

6 ALLAMANDA TERRACE  
KEY WEST, FL 33040

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, URBAN E  
6 ALLAMANDA TERRACE  
KEY WEST, FL 33040

## 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: SMITH, SUE B  
Address: 6 ALLEMANDA TERRACE  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Change (X) Addition  
Name: SMITH, URBAN E  
Address: 6 ALLEMANDA TERRACE  
City-St-Zip: KEY WEST, FL 33040

Title: MGRM ( ) Change (X) Addition  
Name: SMITH-READING, MELISSA J  
Address: 1004 ATLEE DRIVE  
City-St-Zip: KELLER, TX 76248

Title: MGRM ( ) Change (X) Addition  
Name: SMITH, WILLIAM A  
Address: 9083 SCOTTWOOD DRIVE  
City-St-Zip: SHREVEPORT, LA 71106

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: URBAN EUGENE SMITH

MGRM

03/17/2004

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