



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 23, 2004 8:00 am
Secretary of State

08-23-2004 90150 018 ****50.00

DOCUMENT # L03000004955					
1. Entity Name LITTLE RIVER HARDWOOD & FURNITURE COMPANY, LCC					
Principal Place of Business 500 THE ESPLANADE, #604 VENICE, FL 34285			Mailing Address 500 THE ESPLANADE, #604 VENICE, FL 34285		
2. Principal Place of Business 500 The Esplanade Suite, Apt. #, etc. 604		3. Mailing Address 500 The Esplanade Suite, Apt. #, etc. 604			
City & State Venice, Florida		City & State Venice, Florida		08202004 Chg-LLC CR2E083 (10/03)	
Zip 34285-1534		Country		4. FEI Number 51-0446181	
5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent SZABO, PETER 500 THE ESPLANADE, #604 VENICE, FL 34285			7. Name and Address of New Registered Agent Name Allen E. Langdon, Ph.D. Street Address (P.O. Box Number is Not Acceptable) 125 First Avenue City Nokomis FL 34275-4242		
8. 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 <i>Allen E. Langdon</i> August 20, 2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	M, CEO Szabo, Peter 500 The Esplanade, Suite 604 Venice, FL 34285-1534 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	M, COO Turner, Lon 500 The Esplanade, Suite 604 Venice, FL 34285-1534 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
11. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>Peter Szabo CEO</i>			August 20, 2004		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		

Attachment
24080616

August 20, 2004

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314-6327

RE: Annual Corporate Filing

To Whom It May Concern:

Could you please see it in your heart to relieve the late penalty due to the fact that I did ~~not receive the postcard that you sent out?~~ My accountant has informed me that I have not paid the annual fee and sent in the revised form. I'm sorry for this oversight and my accountant assures me that he will now be tracking to make sure that all of the corporations that he works on will file the proper annual reports with fees in the future.

Thank you in advance for your consideration on this matter.

Sincerely,



Little River Hardwood & Furniture Company, LLC

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Peter Szabo - Manager, CEO

500 The Esplanade, #604

Venice, FL 34285-1534