

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005696

Entity Name: L & T BUILDING, LLC

FILED  
Sep 07, 2004  
Secretary of State

## Current Principal Place of Business:

328 SOUTH 12TH STREET  
QUINCY, FL 32351

## New Principal Place of Business:

## Current Mailing Address:

328 SOUTH 12TH STREET  
QUINCY, FL 32351

## New Mailing Address:

FEI Number: 71-0934490

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAYSON, JOHN M  
118-B SALEM COURT  
TALLAHASSEE, FL 32301 US

## 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:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: TRIBUE, MARSBY  
Address: 328 S. 12TH STREET  
City-St-Zip: QUINCY, FL 32351

Title: MGR ( ) Change (X) Addition  
Name: TRIBUE, MARVIN  
Address: 338 E. BAY STREET  
City-St-Zip: QUINCY, FL 32351

Title: MGR ( ) Change (X) Addition  
Name: TRIBUE, LEONARD  
Address: 241 RICHARD MOORE ROAD  
City-St-Zip: QUINCY, FL 32351

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: MARSBY TRIBUE

MGRM

09/07/2004

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