2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 20, 2004
Secretary of State

DOCUMENT# L03000007642

Entity Name: REBEL ENTERPRISES, LLC

Current Principal Place of Business:

5619 WALDEN FARM DRIVE
POWER SPRINGS, GA 30127

New Principal Place of Business:

1475 FINLEY DRIVE
PENSACOLA, FL 32514

Current Mailing Address:

5619 WALDEN FARM DRIVE
POWER SPRINGS, GA 30127

New Mailing Address:

1475 FINLEY DRIVE
PENSACOLA, FL 32514

FEI Number: 86-1055924 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STACKHOUSE, HARRY B
125 WEST ROMANA STREET, SUITE 800
PENSACOLA, FL 32501 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: MGRM ( ) Delete
Name: LEE, GARY
Address: 5619 WALDEN FARM DRIVE
City-St-Zip: POWER SPRINGS, GA 30127

Title: MGRM ( ) Delete
Name: LEE, JENNIFER B
Address: 5610 WALDEN FARM DRIVE
City-St-Zip: POWER SPRINGS, GA 30127

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: LEE, GARY
Address: 1475 FINLEY DRIVE
City-St-Zip: PENSACOLA, FL 32514

Title: MGRM (X) Change ( ) Addition
Name: LEE, JENNIFER B
Address: 1475 FINLEY DRIVE
City-St-Zip: PENSACOLA, FL 32514

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: JENNIFER B. LEE MGRM 05/20/2004

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