

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008417

FILED
Jul 15, 2004
Secretary of State

Entity Name: S.D.F. SPECIALISTS, LLC

Current Principal Place of Business:

250 S. COUNTY ROAD 427, STE. 112
LONGWOOD, FL 32750

New Principal Place of Business:

500 FAWN HILL PL
SANFORD, FL 32771 US

Current Mailing Address:

P.O. BOX 520850
LONGWOOD, FL 327500850

New Mailing Address:

P.O. BOX 308
WARTBURG, TN 37887 US

FEI Number: 59-3011160

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AVIDON, SHARON R
250 S. COUNTY ROAD 427, STE. 112
LONGWOOD, FL 32750

Name and Address of New Registered Agent:

ROBERTS, ANNIE
606 CASA PARK COURT N
WINTER SPRINGS, FL 32708 US

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: ANNIE ROBERTS

07/15/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: AVIDON, SHARON R
Address: 500 FAWN HILL PLACE
City-St-Zip: SANFORD, FL 32771

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: SHARON AVIDON

MGRM

07/15/2004

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