

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2004 8:00 am
Secretary of State

03-29-2004 90557 024 ****50.00

DOCUMENT # L03000009086					
1. Entity Name DEMORGAN PROPERTIES, LLC					
Principal Place of Business 1401 MANATEE AVENUE WEST SUITE 300 BRADENTON, FL 34205			Mailing Address 1900 MAIN STREET, SUITE 300 SARASOTA, FL 34236		
2. Principal Place of Business 1111 3rd Ave West Suite, Apt. #, etc. Ste 160 City & State Bradenton, FL Zip 34205 Country US		3. Mailing Address 1111 3rd Ave West Suite, Apt. #, etc. Ste 160 City & State Bradenton, FL Zip 34205 Country US		24029977 	
02132004 Chg-LLC CR2E083 (10/03)				4. FEI Number 76-0727369	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent RICE, MELISSA K 1900 MAIN STREET SUITE 300 SARASOTA, FL 34236			7. Name and Address of New Registered Agent Name Robert D Bernick Street Address (P.O. Box Number is Not Acceptable) 1111 3rd Ave West, Ste 160 City Bradenton FL Zip Code 34205		
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 DATE _____ <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$50.00 Due by May 1, 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	merm Robert D Bernick 1111 3rd Ave West, Ste 160 Bradenton FL 34205 <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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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:			3/9/04 941-748-9181 Date Daytime Phone #		