

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013472

FILED
Mar 15, 2004
Secretary of State

Entity Name: POOR WHITE TRASH DEVELOPING LLC

Current Principal Place of Business:

621 WHITEHEAD STREET
KEY WEST, FL 33040 US

New Principal Place of Business:

905 EMMA STREET
KEY WEST, FL 33040 US

Current Mailing Address:

621 WHITEHEAD STREET
KEY WEST, FL 33040 US

New Mailing Address:

PO BOX 84
KEY WEST, FL 33041 US

FEI Number: 56-2369982

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARRINGTON, LENKA
621 WHITEHEAD STREET
KEY WEST, FL 33040 US

Name and Address of New Registered Agent:

HARRINGTON, LENKA
905 EMMA STREET
KEY WEST, FL 33040 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: LENKA HARRINGTON

03/15/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HARRISON, LENKA
Address: 621 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

Title: MGR () Delete
Name: KIPP, SEAN R
Address: 623 WHITEHEAD STREET
City-St-Zip: KEY WEST, FL 33040

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HARRINGTON, LENKA
Address: 905 EMMA STREET
City-St-Zip: KEY WEST, FL 33040

Title: MGR (X) Change () Addition
Name: STONE, PHIL
Address: 727 NE 37TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33334

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: LENKA HARRINGTON

MGR

03/15/2004

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