



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 07, 2004 8:00 am
Secretary of State

05-07-2004 90005 029 ****50.00

DOCUMENT # L03000015473							
1. Entity Name ATLAS LLC							
Principal Place of Business 14011 IRVING ST. BROOKSVILLE, FL 34609 US		Mailing Address 14011 IRVING ST. BROOKSVILLE, FL 34609 US		64UB1022			
2. Principal Place of Business		3. Mailing Address		 04262004 Chg-LLC CR2E083 (10/03)			
Suite, Apt. #, etc.		Suite, Apt. #, etc.					
City & State		City & State					
Zip	Country	Zip	Country				
4. FEI Number 20-0009872				Applied For <input type="checkbox"/> Not Applicable			
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required			
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent				
SMITTY SMITH & ASSOCIATES, INC. 3802 EHRlich ROAD TAMPA, FL 33624			Name <i>TERRIE DANIEL</i>				
			Street Address (P.O. Box Number is Not Acceptable)			<i>14011 IRVING ST</i>	
			City <i>BROOKSVILLE</i>		FL	Zip Code <i>34609</i>	
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 <i>TERRIE DANIEL</i>			DATE <i>4-27-04</i>				
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when reinstating)				
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	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition			
NAME		NAME	<i>MGR TERRIE DANIEL</i>				
STREET ADDRESS		STREET ADDRESS	<i>14011 IRVING ST</i>				
CITY-ST-ZIP		CITY-ST-ZIP	<i>BROOKSVILLE, FL 34609</i>				
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition			
NAME		NAME	<i>MGR M LARRY DANIEL</i>				
STREET ADDRESS		STREET ADDRESS	<i>14011 IRVING ST</i>				
CITY-ST-ZIP		CITY-ST-ZIP	<i>BROOKSVILLE, FL 34609</i>				
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition			
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NAME		NAME					
STREET ADDRESS		STREET ADDRESS					
CITY-ST-ZIP		CITY-ST-ZIP					
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: <i>Larry Daniel MGR M</i>			Date <i>4-27-04</i> Daytime Phone # <i>352-279-7525</i>				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date				