

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000015481

FILED
May 06, 2004
Secretary of State

Entity Name: DESOTO INVESTMENT GROUP, L.L.C.

Current Principal Place of Business:

2885 S.E. HIGHWAY 70
ARCADIA, FL 34266

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1808
ARCADIA, FL 34265

New Mailing Address:

FEI Number: 03-0516736

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDRON, EUGENE E JR.
124 NORTH BREVARD AVENUE
ARCADIA, FL 34266 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: BETHEL, WALTER S
Address: 8780 N.W. BETHEL FARMS ROAD
City-St-Zip: ARCADIA, FL 34266

Title: MGRM () Delete
Name: PEACOCK, W J III
Address: P.O. BOX 1808
City-St-Zip: ARCADIA, FL 34265

Title: MGRM () Delete
Name: HARRISON, CHARLES W JR.
Address: 5645 S.E. TAYLOR AVENUE
City-St-Zip: ARCADIA, FL 34266

ADDITIONS/CHANGES:

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

Title: MGRM (X) Change () Addition
Name: PEACOCK, W J III
Address: P.O. BOX 151
City-St-Zip: ARCADIA, FL 34265

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: W. J. PEACOCK, III

MGRM

05/06/2004

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