2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000019746

04-30-2004 90061 027 ****50.00

1. Entity Name
PRIDE LLC

24060270

Principal Place of Business	Mailing Address
915 MIDDLE RIVER DR., STE. 410 FT LAUDERDALE, FL 33304	PO BOX 1411 PALM CITY, FL 34991

04262004 Chg-LLC CR2E063 (10/03)

2. Principal Place of Business	3. Mailing Address
8725 50th Ave.	PO Box 1411
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Sebastian FL	City & State: Palm City FL
Zip: 32958 Country: USA	Zip: 34991 Country: USA

4. FEI Number: 51-0474770 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
COMPLETE CORPORATE SERVICES, INC. 915 MIDDLE RIVER DR., STE. 410 FT LAUDERDALE, FL 33304	Name: Chris Day Street Address (P.O. Box Number is Not Acceptable): 8725 50th Ave City: Sebastian FL Zip: 32958

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: Chris Day Partner Pride LLC 4/27/04
Signature, type or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $80.00
Due by May 1, 2004

Make checks payable to: Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR DAY, CHRISTOPHER PO BOX 1092 BOCA RATON, FL 334291092	☐ Delete	MGR Chris Day PO Box 1411 Palm City FL 34991	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LIDINSKY, RICHARD III PO BOX 1092 BOCA RATON, FL 334291092	☐ Delete	MGR Richard Lidinsky III PO Box 1411 Palm City, FL 34991	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

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2004 JUN 29 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Chris Day Partner Pride LLC 4/24/04 561-302-4956
SIGNATURE AND TYPED OR PRINTED NAME OF MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #