

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023689

FILED
Jul 08, 2004
Secretary of State

Entity Name: MIKE CARTER & ASSOCIATES LLC

Current Principal Place of Business:

2592 SW GROTTTO CIR
PORT ST LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

2592 SW GROTTTO CIR
PORT ST LUCIE, FL 34953

New Mailing Address:

FEI Number: 75-3125238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARTER, MICHAEL
2592 SW GROTTTO CIR
PORT ST LUCIE, FL 34953

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CARTER, MICHAEL L
Address: 2592 SW GROTTTO CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: MGR () Change (X) Addition
Name: CARTER, DEBORAH A
Address: 2592 SW GROTTTO CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34953 US

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: MICHAEL L. CARTER

MGR

07/08/2004

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