2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023932

Entity Name: MCMILLAN AND MASSIE, LLC

FILED Apr 29, 2004 Secretary of State

US

Current Principal Place of Business: New Principal Place of Business:

1881 W. MARION AVE. PUNTA GORDA, FL 33950

Current Mailing Address: New Mailing Address:

C/O ELIZABETH A. MCMILLAN 1881 W. MARION AVE. PUNTA GORDA, FL 33950

Address:

City-St-Zip:

FEI Number: 61-1452861 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HOLMES, DAVID A ESQ
FARR, FARR, EMERICH, ET AL
99 NESBIT ST.
PUNTA GORDA, FL 339503636 US

MCMILLAN, ELIZABETH A
1881 W. MARION AVE.
PUNTA GORDA, FL 339503636 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: ELIZABETH A. MCMILLAN 04/29/2004

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

() Delete MGRM () Change (X) Addition MCMILLAN, ELIZABETH A Name: Name: Address: Address: 1881 W. MARION AVE. City-St-Zip: City-St-Zip: PUNTA GORDA, FL 33950 Title: Title: MGRM () Change (X) Addition () Delete Name: Name: MCMILLAN, WILLIAM C Address: Address: 1881 W. MARION AVE. City-St-Zip: City-St-Zip: PUNTA GORDA, FL 33950 Title: () Delete Title: MGRM () Change (X) Addition MASSIE, RODNEY M Name: Name: Address: Address: 157 BALDWIN CT City-St-Zip: City-St-Zip: PORT CHARLOTTE, FL 33952 Title: () Delete Title: MGRM () Change (X) Addition Name: Name: MASSIE, PAULLA M

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.

Address:

City-St-Zip:

157 BALDWIN CT

PORT CHARLOTTE, FL 33952

SIGNATURE: ELIZABETH A. MCMILLAN MGRM 04/29/2004