

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024528

FILED
Jan 12, 2004
Secretary of State

Entity Name: BLOOD DRIVE CONSULTANTS, LLC

Current Principal Place of Business:

606 RED SAIL LANE
ALTAMONTE SPRINGS, FL 32701 US

New Principal Place of Business:

Current Mailing Address:

606 RED SAIL LANE
ALTAMONTE SPRINGS, FL 32701 US

New Mailing Address:

FEI Number: 20-0076622

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ROBERT
606 RED SAIL LANE
ALTAMONTE SPRINGS, FL 32701 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: SMITH, ROBERT
Address: 606 RED SAIL LN
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: MGRM () Change (X) Addition
Name: KELLER, BRIAN
Address: 321 WEST POPLAR AVE.
City-St-Zip: SAN MATEO, CA 94402

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: ROBERT SMITH

MGRM

01/12/2004

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