2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024994

Entity Name: ACV COMMUNITY SERVICES, L.L.C.

Apr 29, 2004 Secretary of State

Current Principal Place of Business: New P	incipal Place of Business:
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10676 MARVIN JONES BLVD LIVE OAK, FL 32060

Current Mailing Address: New Mailing Address:

P.O. BOX 4551 DOWLING PARK, FL 32064

FEI Number: 54-2118733 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

MOXLEY, JOHN 2320 NE 2ND STREET, STE 4 OCALA, FL 34470

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:

ADDITIONS/CHANGES:

MGR () Change () Addition () Delete Name:

CARANASOS, GEORGE J Name: 2606 NW 27TH TERRACE Address: Address: City-St-Zip: GAINESVILLE, FL 32605 City-St-Zip:

Title: MGR () Delete Title: MGR (X) Change () Addition CARTER, JERRY LYNN Name: DAVIS, JIM Name:

Address: 10229 COUNTY ROAD 136 Address: 2074 CENTRE POINTE BLVD., SUITE 100

City-St-Zip: LIVE OAK, FL 32060 City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR () Delete Title: MGR (X) Change () Addition CRAFT, CHARLES III KENNON, TOM Name: Name:

3109 LANTERN WAY 200 SOUTH OHIO AVENUE Address: Address:

City-St-Zip: WILMINGTON, NC 28409 City-St-Zip: LIVE OAK, FL 32060

Title: MGR () Delete Title: MGR (X) Change () Addition Name: DUGGAR, MARGARET LYNN Name: DUGGAR, MARGARET LYNN

Address: 1018 THOMASVILLE ROAD, SUITE 101 Address: 1018 THOMASVILLE ROAD, SUITE 110

TALLAHASSEE, FL 32303 City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32303

Title: MGR () Delete Title: MGR (X) Change () Addition

FENLASON, JOHN FENLASON, JOHN Name: Name: P.O. BOX 2828 P.O. BOX 2828 Address: Address: City-St-Zip: REUTON, WA 98056 City-St-Zip: RENTON, WA 98056

Title: () Delete Title: () Change (X) Addition

SMITH, HOWARD Name: Name:

Address: Address: 905 LOS PRADOS DE GUADALUPE DR., NW City-St-Zip:

ALBUQUERQUE, NM 87107 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: MARGARET LYNN DUGGAR 04/29/2004