

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000027562

**FILED**  
**Jun 30, 2004**  
**Secretary of State**

**Entity Name:** BACKWORKS, LLC

**Current Principal Place of Business:**

1900 N. MILLS AVENUE, SUITE 102  
ORLANDO, FL 32803

**New Principal Place of Business:**

1900 N. MILLS AVENUE, SUITE 102  
STE 102  
ORLANDO, FL 32803

**Current Mailing Address:**

1900 N. MILLS AVENUE, SUITE 102  
ORLANDO, FL 32803

**New Mailing Address:**

1900 N. MILLS AVENUE, SUITE 102  
STE 102  
ORLANDO, FL 32803

**FEI Number:** 20-0114268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAWIN, PAUL D  
1900 N. MILLS AVENUE, SUITE 102  
ORLANDO, FL 32803

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

SAWIN, PAUL D  
1900 N. MILLS AVENUE, SUITE 102  
STE 102  
ORLANDO, FL 32803

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:

06/30/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: SAWIN, PAUL D PRESIDE  
Address: 1900 N. MILLS AVENUE STE 102  
City-St-Zip: ORLANDO, FL 32803 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: PAUL D. SAWIN

MGR

06/30/2004

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