

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000030068

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

**Entity Name:** MCNEELY MANAGEMENT GROUP, LLC

**Current Principal Place of Business:**

C/O ROBERT A. MCNEELY  
305 SOUTH GADSDEN STREET  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

C/O ROBERT A. MCNEELY  
P.O. BOX 10524  
TALLAHASSEE, FL 323022524

**Current Mailing Address:**

P.O. BOX 10524  
TALLAHASSEE, FL 323022524

**New Mailing Address:**

**FEI Number:** 90-0103643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MCNEELY, ROBERT A  
305 SOUTH GADSDEN STREET  
TALLAHASSEE, FL 32303 US

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

MCNEELY, ROBERT A  
P.O. BOX 10524  
TALLAHASSEE, FL 323022524 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: \_\_\_\_\_

04/30/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: MCNEELY, ROBERT A  
Address: 305 SOUTH GADSDEN STREET  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: MCNEELY, ROBERT A  
Address: P.O. BOX 10524  
City-St-Zip: TALLAHASSEE, FL 323022524

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 A. MCNEELY

MGRM

04/30/2004

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