

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031460

Entity Name: HATTERAS FINANCE, LLC

FILED
Aug 04, 2004
Secretary of State

Current Principal Place of Business:

784 U.S. HIGHWAY 1, SUITE #22-C
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

401 SW 2ND ST
OKEECHOBEE, FL 34974 US

Current Mailing Address:

784 U.S. HIGHWAY 1, SUITE #22-C
NORTH PALM BEACH, FL 33408

New Mailing Address:

401 SW 2ND ST
OKEECHOBEE, FL 34974

FEI Number: 55-0844017

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MGR () Delete
Name: TURLINGTON, JOHN M
Address: 784 U.S. HIGHWAY 1, SUITE #22-C
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: ST () Delete
Name: TURLINGTON, JOHN M
Address: 784 U.S. HIGHWAY 1, SUITE #22-C
City-St-Zip: NORTH PALM BEACH, FL 33408

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: TURLINGTON, JOHN M
Address: 401 SW 2ND ST
City-St-Zip: OKEECHOBEE, FL 34974

Title: MGR (X) Change () Addition
Name: TURLINGTON, JILL
Address: 401 SW 2ND ST
City-St-Zip: OKEECHOBEE, FL 34974

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: JOHN M. TURLINGTON

MGRM

08/04/2004

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