

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000031793

FILED
Apr 15, 2004
Secretary of State

Entity Name: FLORIDA GROUP HOMES, LLC

Current Principal Place of Business:

735 DODECANESE BLVD
SUITE 47
TARPON SPRINGS, FL 34689 US

New Principal Place of Business:

Current Mailing Address:

735 DODECANESE BLVD
SUITE 47
TARPON SPRINGS, FL 34689 US

New Mailing Address:

FEI Number: 81-0630385 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETRUCELLI, DANIEL J
1591 GULF BLVD
#605 SOUTH
CLEARWATER, FL 33767 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: MGRM () Delete
Name: JOHNSON, COREY A
Address: 1459 RUTH ROAD
City-St-Zip: DUNEDIN, FL 34698 US

Title: MGRM () Delete
Name: DOBKIN, HARRIS R
Address: 735 DODECANESE BLVD. SUITE 47
City-St-Zip: TARPON SPRINGS, FL 34689 US

Title: MGRM () Delete
Name: FERRARA, JERRY J
Address: 2606 CYPRUS DRIVE
City-St-Zip: PALM HARBOR, FL 34684 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: COREY A JOHNSON

MGRM

04/15/2004

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