2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 09, 2004
Secretary of State

DOCUMENT# L03000032488

Entity Name: THE ALLEN GROUP (NEUMAYR), LLC

Current Principal Place of Business:

4000 PONCE DE LEON BLVD, STE. 470
CORAL GABLES, FL 33146

New Principal Place of Business:

Current Mailing Address:

4000 PONCE DE LEON BLVD, STE. 470
CORAL GABLES, FL 33146

New Mailing Address:

FEI Number: 20-0186978 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE
SUITE 1300
JACKSONVILLE, FL 32202 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:	( ) Delete
Name:	
Address:	
City-St-Zip:	
Title:	( ) Delete
Name:	
Address:	
City-St-Zip:	
Title:	( ) Delete
Name:	
Address:	
City-St-Zip:	
Title:	( ) Delete
Name:	
Address:	
City-St-Zip:	

ADDITIONS/CHANGES:

Title:	MGRM ( ) Change (X) Addition
Name:	ALLEN, LAVERDA
Address:	4000 PONCE DE LEON BLVD, STE. 470
City-St-Zip:	CORAL GABLES, FL 33146 US
Title:	MGR ( ) Change (X) Addition
Name:	JEFFERSON, CHERLYN
Address:	4000 PONCE DE LEON BLVD., STE. 470
City-St-Zip:	CORAL GABLES, FL 33146 US
Title:	MGR ( ) Change (X) Addition
Name:	NEUMAYR, GEOFFREY
Address:	4000 PONCE DE LEON BLVD., STE 470
City-St-Zip:	CORAL GABLES, CA 33146 US
Title:	MGR ( ) Change (X) Addition
Name:	WRIGHT, ANTHONY C
Address:	4000 PONCE DE LEON BLVD., STE 470
City-St-Zip:	CORAL GABLES, CA 33146 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: ANTHONY C. WRIGHT CFO 09/09/2004

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