

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036590

FILED
Jan 07, 2004
Secretary of State

Entity Name: GRANVILLE PAYMENT SERVICES LLC

Current Principal Place of Business:

9120 CORSEA DEL FONTANA WAY
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

9120 CORSEA DEL FONTANA WAY
NAPLES, FL 34109

New Mailing Address:

FEI Number: 20-0250972

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCDONALD, LARRY A
9120 CORSEA DEL FONTANA WAY
NAPLES, FL 34109 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: GRANVILLE PHARMACY L, TD
Address: SUITE 205 - 3077 GRANVILLE STREET
City-St-Zip: VANCOUVER, BC V6H 3J9 CA

ADDITIONS/CHANGES:

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: GRANVILLE PHARMACY LTD

MGRM

01/07/2004

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