

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000036700

FILED
Apr 22, 2004
Secretary of State

Entity Name: 618 HINTZE MANAGEMENT LLC

Current Principal Place of Business:

502 N.E. 8TH AVENUE
GAINESVILLE, FL 32601

New Principal Place of Business:

Current Mailing Address:

502 N.E. 8TH AVENUE
GAINESVILLE, FL 32601

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINTZE, LARINA K
502 N.E. 8TH AVENUE
GAINESVILLE, FL 32601 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: HINTZE, LARINA K
Address: 502 N.E. 8TH AVE
City-St-Zip: GAINESVILLE, FL 32601

Title: MGR () Delete
Name: HINTZE, MATTHEW B
Address: 502 N.E. 8TH AVE
City-St-Zip: GAINESVILLE, FL 32601

ADDITIONS/CHANGES:

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: LARINA HINTZE

MGRM

04/22/2004

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