2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

DOCUMENT # L03000040492

1. Entity Name

TRANSFORMATION MANAGEMENT SOLUTIONS, LLC



FILED Apr 05, 2004 8:00 am Secretary of State 04-05-2004 90503 001 ***150.00

Principal Place	e of Business	,	Mailing Address			┪				
1343 MAIN STREET SUITE 300 SARASOTA FL 34236 US			1343 MAIN STREET SUITE 300 SARASOTA FL 34236 US				 		 	
2. Principal P	lace of Busin	ess	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.			MOORE CR2E083 (11/03)			
City & State			City & State	City & State			2-07118	214		plied For t Applicable
Zip Country			Zip	Zip Country			e of Status Desired	7	\$5.00 Addi	itional
. 6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
<u></u>		,			Name -		i sair			
WALKER, BARTON T 1343 MAIN STREET SUITE 300					Street Address (P.O. Box Number is Not Acceptable)					
SARASOTA FL 34236					City				Zip Code	
					City			FL	= ZID COGE	*
	named entity ions of regist		t for the purpose of changing its	registere	ed office or regist	ered agent, or b	oth, in the State of Fl	orida. I am	familiar with,	and accept
SIGNATURE .		or printed name of registered ag						·		
	Signature, typed	or printed name of registered ag	gent and title if applicable. (NO)	E: Hegistered	d Agent signature requir	red when reinstating)		DATE		
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indicated	l on this repo	rt is true and accurate:	and that my signature shall have istee empowered to execute this	the same	e legal effect as i	f made under oa	th: that I am a mana	ging memb	er or manage	er of the

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE