

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000043580

FILED
Jul 01, 2004
Secretary of State

Entity Name: CORPORATE QUARTERS, LLC

Current Principal Place of Business:

2465 ELGIN CT
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

2465 ELGIN CT
WELLINGTON, FL 33414

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:

WHITE, KAREN C
2465 ELGIN CT.
WELLINGTON, FL 33414 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: MGR () Delete
Name: WHITE, KAREN C
Address: 2465 ELGIN CT.
City-St-Zip: WELLINGTON, FL 33414

Title: MGR () Delete
Name: WHITE, STEVE A
Address: 2465 ELGIN CT.
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WHITE, KAREN C
Address: 2465 ELGIN CT.
City-St-Zip: WELLINGTON, FL 33414

Title: MGRM (X) Change () Addition
Name: WHITE, STEVE A
Address: 2465 ELGIN CT.
City-St-Zip: WELLINGTON, FL 33414

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: KAREN C. WHITE

MGRM

07/01/2004

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