

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047644

FILED  
Sep 01, 2004  
Secretary of State

Entity Name: ROBERT LAIRD, LLC

## Current Principal Place of Business:

8194 SCHERING STREET  
BROOKSVILLE, FL 34613 US

## New Principal Place of Business:

7179 SPRUCE ST.  
WEEKI WACHEE, FL 34613 US

## Current Mailing Address:

8194 SCHERING STREET  
BROOKSVILLE, FL 34613 US

## New Mailing Address:

7179 SPRUCE ST.  
WEEKI WACHEE, FL 34613 US

FEI Number: 75-3108840

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GIOVINCO, IAN  
7211 HIAWATHA PARKWAY  
SPRING HILL, FL 34606 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: LAIRD, ROBERT  
Address: 8194 SCHERING STREET  
City-St-Zip: BROOKSVILLE, FL 34613 US

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LAIRD, ROBERT  
Address: 7179 SPRUCE ST.  
City-St-Zip: WEEKE WACHEE, FL 34613 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: ROBERT LAIRD

MGRN

09/01/2004

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