

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049381

FILED  
Feb 10, 2004  
Secretary of State

Entity Name: O'GRADY SHEEHAN CAPITAL COMPANY, LLC

## Current Principal Place of Business:

90 ALTON ROAD, SUITE 2606  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

400 ALTON ROAD  
1811  
MIAMI BEACH, FL 33139

## Current Mailing Address:

90 ALTON ROAD, SUITE 2606  
MIAMI BEACH, FL 33139

## New Mailing Address:

400 ALTON ROAD  
1811  
MIAMI BEACH, FL 33139

FEI Number: 20-0443618

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHITE, K. TAYLOR  
2200 MUSEUM TOWER, 150 WEST FLAGLER ST  
MIAMI, FL 33130 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM ( ) Change (X) Addition  
Name: SHEEHAN, DANIEL R  
Address: 400 ALTON ROAD #1811  
City-St-Zip: MIAMI BEACH, FL 33139

Title: MGRM ( ) Change (X) Addition  
Name: O'GRADY, KEVIN M  
Address: 400 ALTON ROAD #1811  
City-St-Zip: MIAMI BEACH, FL 33139

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: DANIEL R. SHEEHAN

MR.

02/10/2004

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