

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049808

Entity Name: KNIGHT & DWYER L.L.C

FILED  
Jul 09, 2004  
Secretary of State

**Current Principal Place of Business:**

1 CORPORATE DRIVE  
SUITE 2D  
PALM COAST, FL 32137

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 350864  
PALM COAST, FL 32135

**New Mailing Address:**

FEI Number: 20-0451178

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEPHEN R.A. KNIGHT & ASSOCIATES L.L.C  
1315 E. LAFAYETTE STREET  
SUITE C  
TALLAHASSEE, FL 32301 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: DWYER, MARC E  
Address: 149 BARRINGTON DRIVE  
City-St-Zip: PALM COAST, FL 32137

Title: MGR ( ) Delete  
Name: KNIGHT, STEPHEN R  
Address: 2019 SUGAR MAPLE COURT  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DWYER, MARC E  
Address: 149 BARRINGTON DRIVE  
City-St-Zip: PALM COAST, FL 32137

Title: MGRM (X) Change ( ) Addition  
Name: KNIGHT, STEPHEN R  
Address: 2019 SUGAR MAPLE COURT  
City-St-Zip: TALLAHASSEE, FL 32308

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: MARC DWYER

MGRM

07/09/2004

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