2003 LIMITED LIABILITY COMPANY ANNUAL REPORT				-	or 14, 2008 08 Secretary of	Sta
Entity Nam					Seer carry of	~~~
	e of Business /AY·31 SOUTH . 34266 US	Mailing Address POST OFFICE BOX 2113 ARCADIA, FL 34265 U	S			
D D)O NOT WRI	TE IN THIS SP	ACE	04072008 No Chg-LLC 4. FEI Number NOT APPLICABLE	CR2E083 (12/07)	_
	6. Name and Address of Cu	arrent Registered Agent		5. Certificate of Status Desired	S5.00 Additional Fee Required	
4 NORT	N, EUGENE E JR. H BREVARD AVENUE FL 34266			DO NOT M IN THIS SI		
The above the obligati	named entity submits this staten	nent for the purpose of changing its reg	istered office or register	ed agent, or both, in the State of F	lorida I am familiar with, and acce	ept
	and a regione ou agein.					
SNATURE_	Signature, typed or printed name of registere	d spont and litle il applicable (NOTE: Reg	gistered Agent signature required	when reinstating)	DATE	
FILE	Signature, lyped or printed name of registere NOW!!! FEE IS \$138.75 y 1, 2008 Fee will be \$53	5 38.75	gistered Agent signature required	when rainstating)	DATE	
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