2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L97000000536

1. Entity Name EVERGLADES POLO, L.C.

Mailing Address

SUITE 600, KRYSTAL BUILDING CHATTANOOGA, TN 37402

SIGNATURE: SIGNATURE AND TYPED OR

Principal Place of Business

SUITE 600, KRYSTAL BUILDING CHATTANOOGA, TN 37402

FILED Jan 23, 2004 08:00 AM Secretary of State



01052004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 58-2316492 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

423-756-1202

6. Name and Address of Current Registered Agent

STRIBLING, G. BOONE 15885 MEADOWWOOD DR WELLINGTON, FL 33414		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE		
Filing Fee is \$50.00 Due by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CHY-ST-ZIP	MGR HAMILTON, M. HAYNE 600 KRYSTAL BUILDING CHATTANOOGA, TN 37402	
TITLE NAME STREET ADDRESS CHY-ST-ZIP		U1/23/04-90041-002 50.00
Title Name Street address City-St-Zip		DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
title Name Street address City-St- <i>I</i> IP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under cath; 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.		

M. Hayne Hamilton
PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE