2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2004
Secretary of State

DOCUMENT# L98000000312

Entity Name: SEMINOLE EXCHANGE, LC

Current Principal Place of Business:

HIGHWAY COUNTY 61, BOX 33
CLEWISTON, FL 33440

New Principal Place of Business:

Current Mailing Address:

71 HICKORY HILL
OSTERVILLE, MA 02655

New Mailing Address:

FEI Number: 06-1520111 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CYPRESS, MARCIA ANN
STAR ROUTE 33
CLEWISTON, FL 33440 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: HOFFMAN, KIM E
Address: 71 HICKORY HILL CIRCLE
City-St-Zip: OSTERVILLE, MA 02655

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: KIM E. HOFFMAN MGR 04/26/2004

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