

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000000564

**FILED**  
**Feb 23, 2004**  
**Secretary of State**

**Entity Name:** AMWARE LOGISTICS SERVICES OF FLORIDA, L.L.C.

**Current Principal Place of Business:**

5301 EAST HANNAH AVENUE  
TAMPA, FL 33610

**New Principal Place of Business:**

**Current Mailing Address:**

1126 PONCE DE LEON AVENUE  
ATLANTA, GA 30306

**New Mailing Address:**

FEI Number: 58-2388278

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: AMWARE LOGISTICS SER, VICES, INC.  
Address: 4600 FRONTAGE ROAD  
City-St-Zip: FOREST PARK, GA 30297

**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: DAVID BOOTHE

MGR

02/23/2004

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