

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 02, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000001662

1. Entity Name

DYE, DEITRICH, PRATHER, PETRUFF & ST. PAUL, P.L.



Principal Place of Business

1111 THIRD AVENUE WEST, SUITE 300
BRADENTON, FL 34205

Mailing Address

1111 THIRD AVENUE WEST, SUITE 300
BRADENTON, FL 34205



01152004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
65-0859628	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

DEITRICH, DAVID K
1111 THIRD AVENUE WEST, SUITE 300
BRADENTON, FL 34205

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

000000030901
02/04/04 00127-019 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	DYE, STEPHEN R
STREET ADDRESS	1111 THIRD AVENUE WEST, SUITE 300
CITY - ST - ZIP	BRADENTON, FL 34205

TITLE	MGRM
NAME	DEITRICH, DAVID K
STREET ADDRESS	1111 THIRD AVENUE WEST, SUITE 300
CITY - ST - ZIP	BRADENTON, FL 34205

TITLE	MGRM
NAME	PRATHER, ALAN H
STREET ADDRESS	1111 THIRD AVENUE WEST, SUITE 300
CITY - ST - ZIP	BRADENTON, FL 34205

TITLE	MGRM
NAME	PETRUFF, PATRICIA A
STREET ADDRESS	1111 THIRD AVENUE WEST, SUITE 300
CITY - ST - ZIP	BRADENTON, FL 34205

TITLE	MGRM
NAME	ST. PAUL, ALEXANDRA
STREET ADDRESS	1111 THIRD AVENUE WEST, SUITE 300
CITY - ST - ZIP	BRADENTON, FL 34205

TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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 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: *Alexandra St. Paul* **ALEXANDRA ST. PAUL**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/28/04 941-748-4411