

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

Fl.

FILED
Jun 04, 2004 8:00 am
Secretary of State

06-04-2004 90271 004 ****50.00

DOCUMENT # L98000001758

1. Entity Name
 A.S.A. ONE, L.C.



Principal Place of Business
 1211 N. WESTSHORE BLVD., SUITE 700
 TAMPA, FL 33607

Mailing Address
 1211 N. WESTSHORE BLVD., SUITE 700
 TAMPA, FL 33607

14023254



04052004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3532581	Applied For Not Applicable
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5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

FORLIZZO, ROBERT A
 13577 FEATHER SOUND DRIVE, SUITE 300
 CLEARWATER, FL 33762

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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 brifted 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**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR AUSTIN, ALFRED S 1211 N. WESTSHORE BLVD., SUITE 700 TAMPA, FL 33607
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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: *Ronald L. Ellett* **RONALD L. ELLETT** 4/7/04 813-289-3886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #