


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

DOCUMENT # L98000002052
 1. Entity Name
FORD INSTRUMENTS & ACCESSORIES, L.C.



Principal Place of Business Mailing Address
6855 TICO ROAD, SUITE 11 **6855 TICO ROAD, SUITE 11**
TITUSVILLE, FL 32780 **TITUSVILLE, FL 32780**



01052004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0874752	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> LLC	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
FORD, BRAD
2043 RUSSELL DR.
TITUSVILLE, FL 32796

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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 _____ (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	MGRM FORD, BRAD 2043 RUSSELL DR TITUSVILLE, FL 32796
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 02/02/04-80012-007 55.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 provided by Chapter 608, Florida Statutes.

SIGNATURE: Brad Ford **BRAD FORD** 01-16-04 321-383-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Day/Time Phone #