

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002261

FILED
Jun 17, 2004
Secretary of State

Entity Name: COMMODITY MANAGEMENT, L.C.

Current Principal Place of Business:

150 S PINE ISLAND RD.
#200
PLANTATION, FL 33324

New Principal Place of Business:

Current Mailing Address:

150 S PINE ISLAND RD.
#200
PLANTATION, FL 33324

New Mailing Address:

FEI Number: 65-0869905

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEDER, GARY A
11575 HERON BAY BLVD.
#309
CORAL SPRINGS, FL 33076 US

Name and Address of New Registered Agent:

FEDER, GARY A
P.O. BOX 268332
WESTON, FL 33326 US

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:

06/17/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: WAYNE, THOMAS
Address: 19506 E. COUNTRY CLUB DRIVE
City-St-Zip: AVENTURA, FL 33180

Title: MGRM () Delete
Name: BORNSTEIN, STEVEN
Address: 3190 WILLOW LANE
City-St-Zip: WESTIN, FL 33331

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WAYNE, THOMAS
Address: 867 SPINNAKER DRIVE WEST
City-St-Zip: HOLLYWOOD, FL 33019

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: THOMAS P. WAYNE

PRES

06/17/2004

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