


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 23, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000001322	
1. Entity Name FLOYD BROTHERS PROPERTIES, L.C.	

Principal Place of Business 101 E 9 1/2 MILE ROAD PENSACOLA, FL 32534	Mailing Address 101 E 9 1/2 MILE ROAD PENSACOLA, FL 32534
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DO NOT WRITE IN THIS SPACE



02172004No Chg-LLC

CR2E083 (10/03)

4. FEI Number 59-3547010	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent KELLAR, LARRY D ESQ. 5514 NORTH DAVIS HWY SUITE 105 PENSACOLA, FL 32503	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 _____ (NOTE: Registered Agent signature required when registering)

DATE _____

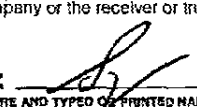
Filing Fee is \$50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLOYD, TIMOTHY W 9805 PINEBRAKE CT PENSACOLA, FL 32514
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FLOYD, SAMUEL D 9565 CHANDLER DRIVE PENSACOLA, FL 32534
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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02/23/04-80169-003 50.00

DO NOT WRITE
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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:  2-19-04 850-484-6007

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