


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000001435 1. Entity Name SAFE HARBOR CAPITAL MANAGEMENT, LLC	
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Principal Place of Business 33920 U.S. HWY. 19 NORTH SUITE 150 PALM HARBOR, FL 34684	Mailing Address 33920 U.S. HWY. 19 NORTH SUITE 150 PALM HARBOR, FL 34684
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DO NOT WRITE IN THIS SPACE



01302004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3577344	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 TANELLA, DEAN G 33920 U.S. HWY. 19 NORTH SUITE 150 PALM HARBOR, FL 34684
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**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 reinstating) _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable.

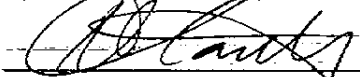
**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TANELLA, DEAN G 33920 U.S. HWY. 19 NORTH, SUITE 150 PALM HARBOR, FL 34684
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04/12/04-80037-012 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  Dean G. Tanella 1/20/04 727-782-4100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #