2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2004 8:00 am
Secretary of State
03-09-2004 90290 016 ****50.00

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1. Entity Name
1875 ORLANDO AVENUE, L.L.C.

Principal Place of Business	Mailing Address
1875 S. ORLANDO AVENUE MAITLAND, FL 32751	1875 S. ORLANDO AVENUE MAITLAND, FL 32751

DO NOT WRITE IN THIS SPACE

01292004 No Chg-LLC CR2E083 (10/03)

4. FEI Number
59-3569512
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required.

6. Name and Address of Current Registered Agent

KREUTER, WILLIAM E
3117 EDGEWATER DRIVE
ORLANDO, FL 32804

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	REID, DONALD L JR.
STREET ADDRESS	1875 S. ORLANDO AVE.
CITY-ST-ZIP	MAITLAND, FL 32751
TITLE	~~Member~~ Managing Member
NAME	Robert G. Reid
STREET ADDRESS	1105 Longwood Bluff Rd.
CITY-ST-ZIP	Same as above FL 32764
TITLE	~~Member~~ Managing Member
NAME	Russell L. Reid
STREET ADDRESS	2214 Earlest ct.
CITY-ST-ZIP	Same as above Longwood, FL 32779
TITLE	~~Member~~ Managing Member
NAME	Bradley W. Reid
STREET ADDRESS	3491 Bantowne Pl.
CITY-ST-ZIP	Same as above Oviedo, FL 32765
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Donald L. Reid Jr 3-2-04 407-322-9337
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #