


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 29, 2004 08:00 AM
Secretary of State

DOCUMENT # L99000005984 1. Entity Name THE LAKELAND PALM GROUP, LLC	
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Principal Place of Business 1905 SOUTH FLORIDA AVENUE LAKELAND, FL 33803	Mailing Address 1905 SOUTH FLORIDA AVENUE LAKELAND, FL 33803
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DO NOT WRITE IN THIS SPACE



01262004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 59-3604404	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CHRITTON, CHARLES P C/O WENDEL, CHRITTON, PARKS & DEBARI 5300 SOUTH FLORIDA AVENUE LAKELAND, FL 33813

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$50.00 Due by May 1, 2004	000000020693 01/29/04-80078-002 150.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WAGNER, ROBERT W 5806 LAKE BREEZE AVENUE LAKELAND, FL 33809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SGJ AVIATION, INC. 1905 SOUTH FLORIDA AVENUE LAKELAND, FL 33803
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CASWELL, JOHN F 510 GOLDENROD COURT LAKELAND, FL 33813
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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)(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 606, Florida Statutes.

SIGNATURE: <i>R. Guerry Jones</i> R. GUERRY JONES 1/26/04 863-682-5151		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<small>Date</small>	<small>Daytime Phone</small>