2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 09, 2004 08:00 AM Secretary of State **DOCUMENT # M00000000160** E. W. BURTON, LLC Principal Place of Business Mailing Address 165 CHAPEL ST. 165 CHAPEL ST. STRATFORD, CT 06614 STRATFORD, CT 06614 01172004 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 06-1563359 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BURTON, KENNETH A DO NOT WRITE 14101 CYPRESS CIRCLE TAMPA, FL 33624 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$50,00 Due by May 1, 2004 9. MANAGING MEMBERS/MANAGERS TITLE MGR BURTON, KENNETH A NAME STREET ADDRESS 14101 CYPRESS CIRCLE U00000041685 CITY-ST-ZIP TAMPA, FL 33624 02/09/04-80099-019 50.00 TITLE NAME STREET ADDRESS CITY-5T-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITI F

11. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR MUTHORIZED REPRESENTATIVE