

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M00000001508

FILED
May 05, 2005
Secretary of State

Entity Name: MARCH/HODGE/THIGPEN DAYTONA, LLC

Current Principal Place of Business:

320-326 NORTH BEACH ST.
DAYTONA BEACH, FL 32114

New Principal Place of Business:

Current Mailing Address:

354 N. BEACH STREET
DAYTONA BEACH, FL 32114 US

New Mailing Address:

FEI Number: 58-2560677 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 US

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: HODGE, ERNEST
Address: 7134 JONESBORO RD.
City-St-Zip: MORROW, GA 30260

Title: MGR () Delete
Name: MARCH, ANTHONY
Address: 77 LEIBERT RD.
City-St-Zip: HARTFORD, CT 06120

Title: VP () Delete
Name: THIGPEN, ROBERT
Address: 354 N. BEACH STREET
City-St-Zip: DAYTONA BEACH, FL 32114

Title: ST () Delete
Name: MCKNIGHT, EDIE C
Address: 354 N. BEACH STREET
City-St-Zip: DAYTONA BEACH, FL 32114

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: LIVINGSTON, PATRICIA J
Address: 354 N. BEACH STREET
City-St-Zip: DAYTONA BEACH, FL 32114

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: PATRICIA J LIVINGSTON

ST

05/05/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date