

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # M01000000105

1. Entity Name  
ATCO NOISE MANAGEMENT LLC



Principal Place of Business  
1243 MCKNIGHT BLVD. N.E.  
CALGARY ALBERTA, AL T2E-5T1 CA

Mailing Address  
1400, 909-11 AVENUE SW  
CALGARY, ALBERTA T2R 1N6, CA



01292004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
98-0180102

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

**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 \_\_\_\_\_

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  
NAME BRITTON, WILLIAM L  
STREET ADDRESS 1600, 909 - 11 AVENUE SW  
CITY - ST - ZIP CALGARY, ALBERTA,

TITLE MGR  
NAME CAMPBELL, JAMES A  
STREET ADDRESS 1600, 909 - 11 AVENUE SW  
CITY - ST - ZIP CALGARY, ALBERTA,

TITLE MGR  
NAME FRENCH, BASIL K  
STREET ADDRESS 1600, 909 - 11 AVENUE SW  
CITY - ST - ZIP CALGARY, ALBERTA,

TITLE MGR  
NAME SOUTHERN, NANCY C  
STREET ADDRESS 1600, 909 - 11 AVENUE SW  
CITY - ST - ZIP CALGARY, ALBERTA,

TITLE MGR  
NAME SOUTHERN, RONALD D  
STREET ADDRESS 1600, 909 - 11 AVENUE SW  
CITY - ST - ZIP CALGARY, ALBERTA,

TITLE MGR  
NAME KMET, WALTER A  
STREET ADDRESS 5115 CROWCHILD TRAIL SW  
CITY - ST - ZIP CALGARY, ALBERTA,

U000000130354  
04/26/04-80114-024 50.00

**DO NOT WRITE  
IN THIS SPACE**

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: JAMES A. CAMPBELL, Manager**

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

**April 5, 2004 (403) 292-7500**

Date

Daytime Phone #