


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Feb 18, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # M01000002059 1. Entity Name BUCKLEY SHULER LAND HOLDINGS, LLC	
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Principal Place of Business 270 CARPENTER DR., SUITE 200 ATLANTA, GA 30328	Mailing Address 270 CARPENTER DR., SUITE 200 ATLANTA, GA 30328
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**DO NOT WRITE IN THIS SPACE**



02122004 No Chg-LLC      CR2E083 (10/03)

4. FEI Number <b>58-2459960</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2004**

U00000055551  
02/18/04-80005-022 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BUCKLEY, RICHARD E 270 CARPENTER DR., STE. 200 ATLANTA, GA 30328
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM SHULER, STEPHEN R 270 CARPENTER DR STE 200 ATLANTA, GA 30328
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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 608, Florida Statutes.

SIGNATURE: Richard E Buckley Managing Member      FEB 16 2004      678-325-2041

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #