2004 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # M01000002234

FILED Apr 14, 2004 08:00 AM Secretary of State

Principal Place of Business 1509 SARAH COURT

MURFREESBORO, TN 37129

ELRÓD & COMPANY, LLC

1. Entity Name

Mailing Address

1509 SARAH COURT MURFREESBORO, TN 37129



DO NOT WRITE IN THIS SPACE

CR2E083 (10/03) 03182004 No Chg-LLC

4. FEI Number 62-1859972

Applied For Not Applicable

5. Certificate of Status Desired

ichard F. Glascock II 04/01/04

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LEXIS DOCUMENT SERVICES INC. 1201 HAYS STREET TALLAHASSEE, FL 32301

SIGNATURE:

DO NOT WRITE IN THIS SDACE

		IN THIS SPACE
The above named entity submits this statement the obligations of registered agent.	t for the purpose of changir	ing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURESignature, typed or printed name of registered a	jent and title if applicable.	(NOTE Registered Agent signature required when reinstating) DATE
Filing Fee is \$50.00 Due by May 1, 2004		100000112426 04/14/04-80022-008 50.00
9. MANAGING MEN	MBERS/MANAGERS	
MGR MAME GLASCOCK, RICHARD F II STREET ADDRESS CITY-SI-ZIP MURFREESBORO, TN 3712		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN THIS SPACE
TITLE NAME STREET ADDRESS CTY-ST-ZIP		
TITLE NAME SIREET ADDRESS CITY-ST-ZIP		
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 606, Florida Statutes.		