

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002277

FILED  
Mar 22, 2004  
Secretary of State

Entity Name: HARSHMAN PHILLIPS AND COMAPNY-1, LLC

**Current Principal Place of Business:**

4480 N. SHALLOWFORD RD STE. 104  
ATLANTA, GA 303386400

**New Principal Place of Business:**

**Current Mailing Address:**

4480 N. SHALLOWFORD RD STE. 104  
ATLANTA, GA 303386400

**New Mailing Address:**

FEI Number: 58-2588557

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHELLER, ELIZABETH  
149 MARINA ISLE PARKWAY #601  
ENGLEWOOD, FL 342232038 US

**Name and Address of New Registered Agent:**

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: MGRM ( ) Delete  
Name: HARSHMAN, WILLIAM C  
Address: 4480 N. SHALLOWFORD RD STE. 104  
City-St-Zip: ATLANTA, GA 303386400

Title: MGRM ( ) Delete  
Name: PHILLIPS, BRUCE A  
Address: 4480 N. SHALLOWFORD RD STE. 104  
City-St-Zip: ATLANTA, GA 303386400

Title: MGRM ( ) Delete  
Name: LERNER, DAVID J  
Address: 4480 N. SHALLOWFORD RD STE. 104  
City-St-Zip: ATLANTA, GA 303386400

**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:

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: BRUCE A. PHILLIPS

MGRM

03/22/2004

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