

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

01-28-2004 90020 030 ****55.00

DOCUMENT # M03000000328																											
1. Entity Name COCODRIE'S LLC																											
Principal Place of Business 18325 MANCHAC PLACE DR PRAIRIEVILLE LA 70768		Mailing Address 18325 MANCHAC PLACE DR PRAIRIEVILLE LA 70768																									
2. Principal Place of Business Cocodrie's Restaurant 8649 Gulf Blvd Maurice, La, Fc. Zip 32566 Country Santa Rosa		3. Mailing Address Same Suite, Apt. #, etc. City & State Zip Country																									
4. FEI Number 02-0655434		Applied For Not Applicable																									
5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required																											
6. Name and Address of Current Registered Agent VOLLAND, RICK 8849 GULF BLVD NAVARRE BEACH FL 32566		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code																									
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 <u>[Signature]</u> Rick Volland 1/22/04 DATE																											
FILE NOW!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004																											
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES																									
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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)(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.																											
SIGNATURE: <u>[Signature]</u>		Date <u>1/22/04</u> 225-266-4076																									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																											