

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000771

FILED
Aug 17, 2004
Secretary of State

Entity Name: TIGER SHORE RECOVERY, LLC

Current Principal Place of Business:

83 W. BRENDA LEE DRIVE
HAMPSTEAD, NC 28443

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 87
HAMPSTEAD, NC 28443

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SOBCZAK, MARY
542-12 ORANGE DRIVE
ALTAMONTE SPRINGS, FL 32701 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: MGR () Delete
Name: JORDAN, DAVID A
Address: 113 CHERRYWOOD COURT
City-St-Zip: JACKSONVILLE, NC 28546

ADDITIONS/CHANGES:

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: DAVID A. JORDAN

MGR

08/17/2004

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