2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2004
Secretary of State

DOCUMENT# M03000001083

Entity Name: ICORE, II, L.L.C.

Current Principal Place of Business:

3639 GULF SHORES PARKWAY
GULF SHORES, AL 36542

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 785
GULF SHORES, AL 36547

New Mailing Address:

FEI Number: 63-1204805 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAUER, JEFFREY T
510 E. ZARAGOZA ST
PENSACOLA, FL 32501 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:	CRABTREE, DAN	
Address:	22765 U.S. HWY 98	
City-St-Zip:	FAIRHOPE, AL 36532	
Title:	MGRM	( ) Delete
Name:	WRIGHT, SHARON	
Address:	25369 U.S. HWY 98	
City-St-Zip:	DAPHNE, AL 36526	
Title:	MGRM	( ) Delete
Name:	ALONZO, TOM	
Address:	3639 GULF SHORES PKWY	
City-St-Zip:	GULF SHORES, AL 36542	

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: THOMAS ALONZO MGRM 01/12/2004

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