2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# M03000003230

Entity Name: AMERICAN GOVERNMENT SERVICES, LLC

Current Principal Place of Business:

TWO APPLE TREE SQUARE, NUMBER 144
BLOOMINGTON, MN 55425

New Principal Place of Business:

TWO APPLE TREE SQUARE, SUITE 220
BLOOMINGTON, MN 55425

Current Mailing Address:

TWO APPLE TREE SQUARE, NUMBER 144
BLOOMINGTON, MN 55425

New Mailing Address:

TWO APPLE TREE SQUARE, SUITE 220
BLOOMINGTON, MN 55425

FEI Number: 74-2953174 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
1333 NORTH DUVAL
TALLAHASSEE, FL 32303 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:	RHODES, WILLIAM B	
Address:	1602 FM 1460	
City-St-Zip:	ROUND ROCK, TX 78664	
Title:	MGR	( ) Delete
Name:	EHRLICH, TINA G	
Address:	1602 FM01460	
City-St-Zip:	ROUND ROCK, TX 78664	
Title:	MGR	( ) Delete
Name:	FERGUSON, BILL	
Address:	860 W. AIRPORT FREEWAY, STE. 305	
City-St-Zip:	HURST, TX 76054	
Title:	MGR	( ) Delete
Name:	HEBERT, CHARLES	
Address:	860 W. AIRPORT FREEWAY, STE. 305	
City-St-Zip:	HURST, TX 76054	
Title:	MGR	( ) Delete
Name:	EDWARDS, DERRICK	
Address:	TWO APPLE TREE SQUARE, NUMBER 144	
City-St-Zip:	BLOOMINGTON, MN 55425	

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:	
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: DERRICK EDWARDS MGR 07/01/2004

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