2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M98000000389

Entity Name: HARRIS & FORD, LLC

Name:

Address:

City-St-Zip:

LAMOTHE, CHRISTOPHER P

INDIANAPOLIS, IN 46216

9307 E. 56TH ST.

FILED Jun 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 9307 E. 56TH ST. INDIANAPOLIS, IN 46216 **Current Mailing Address: New Mailing Address:** 9307 E. 56TH ST INDIANAPOLIS, IN 46216 FEI Number: 35-1909612 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALTERS, ED WALTERS, ED 900 SNOW QUEEN DRIVE 731 MILLS ESTATE PLACE CHULUOTA, FL 32766 OVIEDO, FL 32766 US 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: 06/30/2004 Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Delete () Change () Addition HARRIS, TIMOTHY M Name: Name: 9307 E. 56TH ST. Address: Address: City-St-Zip: INDIANAPOLIS, IN 46216 City-St-Zip: Title: MGR () Delete Title: MGR (X) Change () Addition Name: WALTERS, ED Name: WALTERS, ED Address: 900 SNOW QUEEN DRIVE Address: 731 MILLS ESTATE PLACE City-St-Zip: CHULUOTA, FL 32766 City-St-Zip: OVIEDO, FL 32766 Title: MGRM () Delete Title: () Change () Addition FORD, JOSEPH E Name: Name: Address: 9307 E. 56TH ST. Address: City-St-Zip: INDIANAPOLIS, IN 46216 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: TIMOTHY HARRIS MGRM 06/30/2004