2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2004
Secretary of State

DOCUMENT# M99000000149

Entity Name: ASSOCIATED SALES GROUP, L.C.

Current Principal Place of Business:

777 NORTH HIGHWAY A1A, SUITE 202
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

777 NORTH HIGHWAY A1A, SUITE 202
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 59-3552167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPAMERICA, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: PORTOLA PACKAGING, I, NC.
Address: 890 FAULSTICH COURT
City-St-Zip: SAN JOSE, CA 95112

Title: MGR ( ) Delete
Name: FRITZ, ROBERT A
Address: 777 NORTH HIGHWAY A1A, SUITE 202
City-St-Zip: INDIATLANTIC, FL 32903

Title: MGR ( ) Delete
Name: KUEHN, SCOTT D
Address: 777 NORTH HIGHWAY A1A, SUITE 202
City-St-Zip: INDIALANTIC, FL 32903

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: ROBERT A. FRITZ MGR 03/17/2004

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