

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 05, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000005362

1. Entity Name
DEIGNER ENTERPRISES, L.L.C.



Principal Place of Business
**1544 LEVERN ST.
CLEARWATER, FL 33755**

Mailing Address
**1544 LEVERN ST.
CLEARWATER, FL 33755**



05032004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3655783

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DEIGNER, FRIEDRICH
1544 LEVERN ST.
CLEARWATER, FL 33755**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Friedrich Deigner*
Signature, typed or printed name of registered agent and title if applicable.

FRIEDRICH DEIGNER
(NOTE: Registered Agent signature required when restate)

30-APRIL 2004
DATE

**Filing Fee is \$50.00
Due by September 8, 2004**

000000156409
05/05/04-80077-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**MGR
DEIGNER, FRIEDRICH
1544 LEVERN ST.
CLEARWATER, FL 33755**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEC
DEIGNER, SANDRA
1544 LEVERN ST.
CLEARWATER, FL 33755**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TRES
DEIGNER, BRIGITTA
1544 LEVERN ST.
CLEARWATER, FL 33755**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: FRIEDRICH DEIGNER, PRESIDENT

F. Deigner

30-APRIL 2004

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #