


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 16, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000013470

1. Entity Name
AVENIR INTERNATIONAL, LLC



Principal Place of Business REYNOLDS ASSOCIATES 8955 FONTANA DEL SOL WAY NAPLES, FL 34109	Mailing Address REYNOLDS ASSOCIATES 8955 FONTANA DEL SOL WAY NAPLES, FL 34109
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01092004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-1053659	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

REYNOLDS, NANCY
REYNOLDS ASSOCIATES
8955 FONTANA DEL SOL WAY
NAPLES, FL 34109

**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: _____ (NOTE: Registered Agent signature required when reinstating)

DATE: _____

**Filing Fee is \$50.00
Due by May 1, 2004**

U000000029361
03/16/04-80011-005 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM ROMAN, BRUCE E 21450 PELICAN SOUND DR. #201 ESTERO, FL 33928
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE
IN THIS SPACE**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: _____ **3.10.04**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #