

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 20, 2004 8:00 am
Secretary of State

08-20-2004 90065 006 ****50.00

DOCUMENT # L01000017324

1. Entity Name
ADAPTURE, LLC



Principal Place of Business
4126 CENTRAL SARASOTA PKWY
2022
SARASOTA, FL 34238 US

Mailing Address
4126 CENTRAL SARASOTA PKWY
2022
SARASOTA, FL 34238 US

2. Principal Place of Business
212 Saratoga Blvd E
 Suite, Apt. #, etc.

3. Mailing Address
1128 Royal Palm Beach Blvd
 Suite, Apt. #, etc.
#270

City & State
Royal Palm Beach, FL

City & State
Royal Palm Beach, FL

Zip
33411

Country
Palm Beach

Zip
33411

Country
Palm Beach

07062004 Chg-LLC CR2E083 (10/03)

4. FEI Number
65-1144565

Applied For
 Not Applicable

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

CANTER, MARK S-
4152 CENTRAL SARASOTA PKWY
718
SARASOTA, FL 34238

7. Name and Address of New Registered Agent

Name
Canter, Mark S

Street Address (P.O. Box Number is Not Acceptable)
212 Saratoga Blvd E

City
Royal Palm Beach

FL Zip Code
33411

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 *Mark S Canter* **Mark S Canter** August 15 '04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CANTER, MARK S MR. <input type="checkbox"/> Delete 4126 CENTRAL SARASOTA PKWY, APT# 2022 SARASOTA, FL 34238	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Canter, Mark S Mr. 212 Saratoga Blvd E Royal Palm Beach, FL 33411
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Delete CROTHERS, TIMOTHY P MR. 2911 VALLEY FORGE ST. SARASOTA, FL 34231	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Crotthers, Timothy P Mr. 120 Summer Pines Dr. Blk the wood, SC 29016
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Canter, Thomas E Mr. 371 North Golf Harbor Path Inverness, FL 34450
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Mark S Canter* **Mark S Canter** August 15 '04 ⁵⁰¹ (561) 718-3928
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #