# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Apr 30, 2004**
**Secretary of State**

DOCUMENT# L02000007101

**Entity Name:** PRODUCTS ETC., LLC

**Current Principal Place of Business:**

12750 COMMONWEALTH DR.
FORT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

12750 COMMONWEALTH DR.
FORT MYERS, FL 33913

**New Mailing Address:**

**FEI Number: 03-0432985** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

VON BERG, PETER
12750 COMMONWEALTH DR.
FORT MYERS, FL 33913

**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: PD ( ) Delete
Name: VON BERG, PETER
Address: 12750 COMMON WEALTH DR.
City-St-Zip: FORT MYERS, FL 33913

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition
Name: VON BERG, PETER
Address: 12750 COMMON WEALTH DR.
City-St-Zip: FORT MYERS, FL 33913

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: PETER VON BERG MGRM 04/30/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date