2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

ANNUAL REPORT DOCUMENT # L02000017632

1. Entity Name 20 BARKLEY CIRCLE, LLC

Secretary of State 05-13-2004 90324 022 ****50.00

FILED

May 13, 2004 8:00 am

Principal Place of Business

3836 HAROLD AVE FORT MYERS, FL 33901 Mailing Address 3836 HAROLD AVE FORT MYERS, FL 33901



DO NOT WRITE IN THIS SPACE

03202004 No Chg-LLC CR2E083 (10/03)

4. FEI Number Applied For Not Applied For Not Applicable

5. Certificate of Status Desired Status Desired Fee Required Fee Required

R5-10-04 239-275-1

6. Name and Address of Current Registered Agent

TANNENBAUM, ALAN L 3836 HAROLD AVE FORT MYERS, FL 33901

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent		(NOTE: Registered Agent signature required when reinstating) DATE
sign : Filling:Fee is \$50.00 പട്ടാല by May 1,2004 ്രി ഗദ്ര മോട്രി ക്യൂര്യ		
9. ਕਹਾ	MANAGING MEMBERS/MANAGERS	· · · · · · · · · · · · · · · · · · ·
TITLE	MGRM	
NAME	TANNENBAUM, ALAN L	
STREET ADDRESS	3836 HAROLD AVE	
CITY-ST-ZIP	FORT MYERS, FL 33901	
TITLE	MGRM	
NAME	TANNENBAUM, MONIKA A	
STREET ADDRESS	3836 HAROLD AVE	
CITY-ST-ZIP	FORT MYERS, FL 33901	
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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR AUTHORIZED REPRESENTATIVE