

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000028324

FILED  
Apr 15, 2004  
Secretary of State

Entity Name: JWN 43, LLC

**Current Principal Place of Business:**

11780 US HWY. #1, STE. 400  
NORTH PALM BEACH, FL 33408

**New Principal Place of Business:**

11780 US HWY. #1, STE. 500  
NORTH PALM BEACH, FL 33408

**Current Mailing Address:**

11780 US HWY. #1, STE. 400  
NORTH PALM BEACH, FL 33408

**New Mailing Address:**

11780 US HWY. #1, STE. 500  
NORTH PALM BEACH, FL 33408

FEI Number: 22-3890860

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAILE, SHAW & PFAFFENBERGER, P.A.  
11780 US HWY. #1, STE. 400  
NORTH PALM BEACH, FL 33408 US

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

HAILE, SHAW & PFAFFENBERGER, P.A.  
11780 US HWY. #1, STE. 300  
NORTH PALM BEACH, FL 33408 US

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: OREN S. TASINI

04/15/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: NICKLAUS, JACK W  
Address: 11780 U.S. HWY #1 SUITE 400  
City-St-Zip: NORTH PALM BEACH, FL 33408

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: NICKLAUS, JACK W  
Address: 11780 U.S. HWY #1 SUITE 500  
City-St-Zip: NORTH PALM BEACH, FL 33408

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: JACK W. NICKLAUS

MGR

04/15/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date