

2004 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
04 JUN 23 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L02000031364					
1. Entity Name STEAMPLANT CONDOMINIUMS, LLC					
Principal Place of Business 201 FRONT STREET, SUITE 224 KEY WEST, FL 33040			Mailing Address 201 FRONT STREET, SUITE 224 KEY WEST, FL 33040		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BELLAND, CHRISTOPHER 201 FRONT STREET, SUITE 224 KEY WEST, FL 33040				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL Zip Code	
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 _____					
Amended AR is \$50.00		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SWIFT, EDWIN O III 201 FRONT ST., #224 KEY WEST, FL 33040	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BELLAND, CHRISTOPHER C 201 FRONT ST., #224 KEY WEST, FL 33040	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BUDDINGER, WM 504 NOAH LN KEY WEST, FL 33040	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 incorporator or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE			Date: June 23, 2004 (305) 294-4142 Daytime Phone:		

2004
AMENDED
A.R.



CORPORATION SERVICE COMPANY

L020000031364

ACCOUNT NO. : 072100000032

REFERENCE : 772699 7395363

AUTHORIZATION :

COST LIMIT :

Patricia P. P.
\$ 50.00

ORDER DATE : June 23, 2004

ORDER TIME : 3:41 PM

ORDER NO. : 772699-005

CUSTOMER NO: 7395363

CUSTOMER: Ms Denise Mclaughlin
Michelle I. Cates, P.a.
Suite 110
201 Front Street
Key West, FL 33040

BP

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TALLAHASSEE, FLORIDA

ANNUAL REPORT FILING

NAME: STEAMPLANT CONDOMINIUMS, LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman-EXT#2908

EXAMINER'S INITIALS: _____

RECEIVED
04 JUN 23 PM 4:11
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA