

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000018661

FILED  
Jan 14, 2004  
Secretary of State

**Entity Name:** ILER GROUP, LLC

**Current Principal Place of Business:**

5620 E. FOWLER AVENUE  
SUITE 5  
TAMPA, FL 33617

**New Principal Place of Business:**

**New Mailing Address:**

5620 E. FOWLER AVENUE  
SUITE 5  
TAMPA, FL 33617

**Current Mailing Address:**

8418 FENWICK AVENUE  
TAMPA, FL 33647

FEI Number: 41-2096036

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ILER, ERON C  
8418 FENWICK AVENUE  
TAMPA, FL 33647 US

**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: PRES ( ) Delete  
Name: ILER, ERON C  
Address: 8418 FENWICK AVENUE  
City-St-Zip: TAMPA, FL 33647

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: ILER, ERON C  
Address: 8418 FENWICK AVENUE  
City-St-Zip: TAMPA, FL 33647

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: ERON C ILER

MGR

01/14/2004

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