

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2004 08:00 AM
Secretary of State

DOCUMENT # M00000000978	
1. Entity Name NEPTUNE INVESTMENTS L.L.C.	

Principal Place of Business PO BOX 3369 PLACIDA, FL 33946	Mailing Address PO BOX 3369 PLACIDA, FL 33946
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01072004 No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 38-3377102	Applied For Not Applicable
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5. Certificate of Status Desired	☒ \$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent RICE, MELISSA K 1900 MAIN STREET SARASOTA, FL 34236
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**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HUFFMAN, JOSEPH C PO BOX 3369 PLACIDA, FL 33946
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HUFFMAN, ELIZABETH A PO BOX 3369 PLACIDA, FL 33946
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04/12/04-80107-012 55.00

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IN THIS SPACE**

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: *Elizabeth A. Huffman* *Elizabeth A. Huffman* 1-7-04 *698-0852*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #