

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Mar 09, 2004 8:00 am**  
**Secretary of State**

03-09-2004 90292 043 \*\*\*\*50.00

**DOCUMENT # L00000006303**

1. Entity Name  
**DIZEL DEVELOPERS, LLC**



Principal Place of Business  
**7700 CONGRESS AVE STE 3105  
BOCA RATON, FL 33487**

Mailing Address  
**7700 CONGRESS AVE STE 3105  
BOCA RATON, FL 33487**

**DO NOT WRITE IN THIS SPACE**



02052004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
**65-1011089**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

~~ZELENKOWSKIE, PAUL~~ **Richard Shavell**  
**7700 CONGRESS AVE STE 3105  
BOCA RATON, FL 33487**

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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

*Richard L. Shavell*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE	<del>MGRM</del>	<b>MGRM</b>
NAME	<del>ZELENKOWSKIE, PAUL</del>	<b>Richard Shavell</b>
STREET ADDRESS	<del>6514 NW 39TH TERR</del>	<b>7700 Congress Av</b>
CITY-ST-ZIP	<del>BOCA RATON, FL 33496</del>	<b>Boca Raton, FL 33487</b>
TITLE	<del>MGRM</del>	
NAME	<del>BOUNAVENTURO, JOHN D</del>	
STREET ADDRESS	<del>820 HEATHERSTONE DR</del>	
CITY-ST-ZIP	<del>BERWYN, PA 19312</del>	
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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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:**

*Richard L. Shavell*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #