

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009640

FILED  
Jan 16, 2004  
Secretary of State

Entity Name: MCS ASSETS, L.L.C.

**Current Principal Place of Business:**

451 BAYFRONT PLACE  
UNIT #5302  
NAPLES, FL 34102

**New Principal Place of Business:**

**Current Mailing Address:**

451 BAYFRONT PLACE  
UNIT #5302  
NAPLES, FL 34102

**New Mailing Address:**

FEI Number: 59-3682869

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WHITE, JOHN P  
5051 CASTELLO DRIVE, SUITE 206  
PARRISH, WHITE, LAWHON & MOORE, P.A.  
NAPLES, FL 34103 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: MGRM ( ) Delete  
Name: SANDOR, MARILYN C DR.  
Address: 451 BAYFRONT PLACE, UNIT 5302  
City-St-Zip: NAPLES, FL 34102

Title: MGRM ( ) Delete  
Name: SANDOR, LOUIS  
Address: 21972 NORTH HIGHWAY 59  
City-St-Zip: BARRINGTON, IL 60010

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM (X) Change ( ) Addition  
Name: SANDOR, LOUIS  
Address: 21072 NORTH HIGHWAY 59  
City-St-Zip: BARRINGTON, IL 60010

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: MARILYN C. SANDOR

MGRM

01/16/2004

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