

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90062 015 ****50.00

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1. Entity Name
EXCALIBUR MARKETING, LLC

Principal Place of Business
550 FAIRWAY DR
#107
DEERFIELD BEACH, FL 33441

Mailing Address
550 FAIRWAY DR
#107
DEERFIELD BEACH, FL 33441



2. Principal Place of Business
6400 N. ANDREWS AVE.

3. Mailing Address
6400 N. ANDREWS AVE.

Suite, Apt. #, etc.
SUITE 280

Suite, Apt. #, etc.
SUITE 280

04212004 Chg-LLC CR2E083 (10/03)

City & State
FT. LAUDERDALE, FL

City & State
FT. LAUDERDALE, FL

4. FEI Number
65-1035865

Applied For
Not Applicable

Zip Country
33309 USA

Zip Country
33309 USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GERET, PAMELA
550 FAIRWAY DR
#107
DEERFIELD BEACH, FL 33441

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
6400 N. ANDREWS AVE.
SUITE 280
City
FT. LAUDERDALE FL Zip Code
33309

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

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

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM ☐ Delete
NAME SHEEHAN, KEVIN
STREET ADDRESS 550 FAIRWAY DR #107
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE MGR ☐ Delete
NAME GELET, PAMELA
STREET ADDRESS 550 FAIRWAY DR #107
CITY-ST-ZIP DEERFIELD BEACH, FL 33441

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6400 N. ANDREWS AVE.- SUITE 280
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 6400 N. ANDREWS AVE.- SUITE 280
CITY-ST-ZIP FT. LAUDERDALE, FL 33309

TITLE ☐ Change ☒ Addition
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NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: PAMELA GELET

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

4/23/04 (954) 776-4606

Date

Daytime Phone

EXT. 105