

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008505

FILED  
Feb 21, 2004  
Secretary of State

Entity Name: RLVR, LLC

## Current Principal Place of Business:

2861 SANTA BARBARA BLVD.  
NAPLES, FL 34116

## New Principal Place of Business:

1924 SANTA BARBARA BLVD.  
SUITE 1-C  
NAPLES, FL 34116

## Current Mailing Address:

2861 SANTA BARBARA BLVD.  
NAPLES, FL 34116

## New Mailing Address:

1924 SANTA BARBARA BLVD.  
SUITE 1-C  
NAPLES, FL 34116

FEI Number: 59-3722868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRAZIANI, LEEANNE W  
2861 SANTA BARBARA BLVD.  
NAPLES, FL 34116 US

## Name and Address of New Registered Agent:

GRAZIANI, LEEANNE W  
1924 SANTA BARBARA BLVD.  
SUITE 1  
NAPLES, FL 34116 US

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:

02/21/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: GRAZIANI, LEEANNE W  
Address: 2861 SANTA BARBARA BLVD.  
City-St-Zip: NAPLES, FL 34116

Title: MGRM ( ) Delete  
Name: GRAZIANI, RONEN  
Address: 2861 SANTA BARBARA BLVD.  
City-St-Zip: NAPLES, FL 34116

Title: MGRM ( ) Delete  
Name: PATEL, VIMAL  
Address: 2801 SANTA BARBARA BLVD  
City-St-Zip: NAPLES, FL 34116

Title: MGRM ( ) Delete  
Name: SAAD, RAUL E  
Address: 5630 COPPER LEAF LANE  
City-St-Zip: NAPLES, FL 34116

## ADDITIONS/CHANGES:

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

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

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

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

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: LEEANNE W. GRAZIANI

MGRM

02/21/2004

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