2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L01000016930

1. Entity Name

BERKLEY & ASSOCIATES, LLC



FILED Apr 05, 2004 08:00 AM Secretary of State

Principal Place of Business

1000 NORTH US HIGHWAY 1

615___

JUPITER FL 33477

Mailing Address

1000 NORTH US HIGHWAY 1

515

JUPITER, FL 33477



03232004 No Chg-LLC

CR2E083 (10/03)

FEI Number
 65-1154110

 Certificate of Status Desired

\$5.00 Additional Fee Required

Applied For

Not Applicable

6. Name and Address of Current Registered Agent

LEWIS, RHEA B 1000 NORTH US HIGHWAY 1 615

JUPITER, FL 33477

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 the above named entity submits this statement for the purpose of chan the obligations of registered agent. 	ging its registered office or registered agent, or both,	in the State of Florida. I am tamiliar with, and accept
SIGNATURE		
Signature, typed or printed name of registered agent and title if apolicable	GASTF. Becastered agent argusture required upper remotatural	CATE

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

9. MANAGING MEMBERS/MANAGERS	
TITLE	MGRM
NAME	LEWIS, RHEA B
STREET ADDRESS	6887 CYPRESS COVE CIRCLE
CITY-ST-ZIP	JUPITER, FL 33458
THLE	MGRM
NAME	BERKLEY, ERIC S
STREET ADDRESS	11622 SW 33RD PLACE
CITY -ST - ZIP	PORTLAND, OR 97219
TITLE	MGR
NAME	BERKLEY, STANLEY G
STREET ADDRESS	1000 NORTH US HIGHWAY 1, SUITE 615
CETY ST-ZEP	JUPITER, FL 33477
TATLE	
NAME	
STREET ADDRESS	
CITY-SY-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
RILE	
NAME	
STREET ADDRESS	
CETY - SE - ZEP	

and

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 808, Florida Statutes.

SIGNATURE:

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

4/1/04

561-143-0600