



2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90058 027 ****50.00

DOCUMENT # L01000018160 1. Entity Name EARTHMARK COMPANIES, LLC					
Principal Place of Business C/O ROSEN DEVELOPMENT GROUP, LLC 550 MAMARONECK AVE., STE. 505 HARRISON, NY 10528				Mailing Address 2250 AVENIDA DEL VERA FORT MYERS, FL 33917	
2. Principal Place of Business 12800 UNIVERSITY DR.		3. Mailing Address 12800 UNIVERSITY DR.			
Suite, Apt. #, etc. SUITE 400		Suite, Apt. #, etc. SUITE 400		03152004 Chg-LLC CR2E083 (10/03)	
City & State FORT MYERS, FL		City & State FORT MYERS, FL		4. FEI Number 58-2659236	
Zip 33907		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent CALLAHAN, W. SCOTT 37 N. ORANGE AVE., STE. 200 ORLANDO, FL 32801-3388				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ (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			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ROSEN, MICHAEL E 2250 AVENIDA DEL VERA NORTH FT MYERS, FL 33917	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	12800 University Dr., Ste 400 Fort Myers, FL 33907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CORDELLO, DOUGLAS 2250 AVENIDA DEL VERA NORTH FORT MYERS, FL 33917	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	12800 University Dr., Ste 400 Fort Myers, FL 33907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(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: <u><i>D. Cordello</i></u> 4/29/04					