## -2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L01000018160



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

	. Entity Name EARTHMARK COMPANIES, LLC			04-28-2004	04-28-2004 90058 027 ****50.00		
	DEVELOPMENT GROUP, LLC DNECK AVE., STE. 505	Mailing Address 2250 AVENIDA DEL VERA FORT MYERS, FL 33917			I danak nede nasa isana akhir denadi ku ibai		
2800 Suite, Apt.	UNIVERSITY DR. #, etc.	3. Mailing Address 12800 UNIV Suite, Apt. #, etc. 5017E 400	IERSIT	V DR. 03152004 Chg-LLC	CR2E083 (10/03)		
_City & State	e	City & State		4. FEI Number	Applied For		
FORT	MYERS, FL	FORT MYERS	<del></del>	58-2659236	Not Applicable		
- 339d		3390F	Country	5. Certificate of Status Desired	S5.00 Additional Fee Required		
	6. Name and Address of Current F	Registered Agent	Name	7. Name and Address of New R	egistered Agent		
CALLAHAN, W. SCOTT 37 N. ORANGE AVE., STE. 200 ORLANDO, FL 32801-3388			,				
			Street Address (P.O. Box Number is Not Acceptable)				
			City		Zip Code		
8 The above	named entity submits this statement for	the nurnose of changing its re	gistered office or	registered agent, or both, in the State of Flo			
	ions of registered agent.	are purpose of changing its re	gistered unice of	registered agent, or both, in the State of Fic	лоа. тапталшаг мил, ало ассерг		
-SIGNATURE:	Signature, typed or printed name of registered agent a	nd title If applicable. (NOTE: 8	legistered Agent signatu	re required when reinstating)	DATE		
Filing Fee is \$50.00 Due by May 1, 2004				■ 1. 1. 1	e check payable to		
9.	MANAGING MEMBER		10.	ADDITIONS			
NAME	ROSEN, MICHAEL E	Delete	TITLE NAME	12800 University Dr., Ste 400 Fort Myers, FL 33907	Change Addition		
STREET ADDRESS CITY-ST-ZIP	2250 AVENDA DEL VERA NORTH FT MYERS, FL 33917		STREET ADDRESS CITY-ST-ZIP	E Constitution of the			
TITLE	MGR	☐ Delete	TITLE	12800 University Dr., Ste 400	Change		
NAME STREET ADDRESS	CORDELLO, DOUGLAS 2250 AVENIDA DEL VERA		NAME STREET ADDRESS	Fort Myers, FL 33907			
CITY-ST-ZIP	NORTH FORT MYERS, FL 3391	7	CITY-ST-ZIP		,		
TITLE	MGR	☐ Delete	TITLE	12800 University Dr., Ste 400	Change Addition		
NAME	CORDELLO, DOUGLAS		NAME	Fort Myers, FL 33907	•		
STREET ADDRESS CITY-ST-ZIP	2250 AVENIDA DEL VERA NORTH FT MYERS, FL 33917		STREET ADDRESS CITY+ST+ZIP	(	}		
TITLE		☐ Delete	TITLE	10.11	Change Addition		
NAME_	9 8 <del>70</del> 4 - 4	و <u>يد</u> سيستدول اليوني والماصوات	NAME		· •••		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		Delete	TITLE		☐ Change ☐ Addition		
NAME		<b>25</b> 00000	NAME		_ stanton		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP				
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition		
NAME	I		NAME STREET ADDRESS	,			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP		••		
STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for that my signature and the	CITY-ST-ZIP	ted in Section 119.07(3)(i), Florida Statutes.	I further certify that the information		
STREET ADDRESS CITY-ST-ZIP 11. I hereby indicated	certify that the information supplied with on this report is true and accurate and ability company or the reserver or trustee	that my signature shall have th	CITY-ST-ZIP he exemption sta	ect as if made under oath; that I am a mana by Chapter 608, Florida Statutes.	I further certify that the information		
STREET ADDRESS CITY-ST-ZIP 11. I hereby indicated limited lia	on this report is true and accurate and	that my signature shall have th	CITY-ST-ZIP he exemption sta	ct as if made under oath; that I am a mana	I further certify that the information		
STREET ADDRESS CITY-ST-ZIP 11. I hereby indicated limited lia	d on this report is true and accurate and ability company or the resouver or trustee	that my signature shall have the empowered to execute this re	CITY-ST-ZIP  he exemption state same legal effetport as required  4/20/0	ict as if made under oath; that I am a mana by Chapter 608, Florida Statutes. ્રા ભાગામક જાણાના ઉપયોગ જિલ્લા જ	I further certify that the information		