

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90272 013 ****50.00

DOCUMENT # L01000018807

1. Entity Name

ADVANCE CONCEPTS, L.C.



Principal Place of Business

2200 LUCIEN WAY SUITE 280
MAITLAND FL 32751

Mailing Address

2200 LUCIEN WAY SUITE 280
MAITLAND FL 32751

2. Principal Place of Business

1060 Maitland Center Commons

Suite, Apt. #, etc.

365 (Suite)

City & State

Maitland, FL

Zip

32751

Country

Orange

3. Mailing Address

1060 Maitland Center Commons

Suite, Apt. #, etc.

365 (Suite)

City & State

Maitland, FL

Zip

32751

Country

Orange



MOORE

CR2E083 (11/03)

4. FEI Number

59-3314961

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HABAS, LEONARD H
2200 LUCIEN WAY SUITE 280
MAITLAND FL 32751

1060 Maitland Center Commons Ste 365
Maitland, FL 32751

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/13/04
DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME HABAS, LEONARD H
STREET ADDRESS 713 VIA LUGANO
CITY-ST-ZIP WINTER PARK FL 32789

TITLE MGR ☐ Delete
NAME LEVECCHIO, ANTHONY J
STREET ADDRESS 1706 CARMEL DRIVE
CITY-ST-ZIP PLANO TX 75075

TITLE MGR ☐ Delete
NAME KRESGE, CARY JR
STREET ADDRESS 2045 SUMMERLAND AVENUE
CITY-ST-ZIP WINTER PARK FL 32789

TITLE MGR ☐ Delete
NAME MULHARE, EDWARD A
STREET ADDRESS 686 WESTVIEW COURT
CITY-ST-ZIP RIVER EDGE NJ 07661

TITLE MGR ☐ Delete
NAME RESANOVICH, MILAN
STREET ADDRESS 21 ROBIN HOOD LANE
CITY-ST-ZIP CHATHAM NJ 07928

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

TITLE ☐ Change ☐ Addition
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:

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

Date

Daytime Phone #

2/13/04

407-916-1950

