

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000020061

1. Entity Name
DIPUB, LLC



Principal Place of Business
1401 MANATEE AVENUE WEST
SUITE 910
BRADENTON, FL 34205 US

Mailing Address
1401 MANATEE AVENUE WEST
SUITE 910
BRADENTON, FL 34205 US



02112004No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent

MURRELL, FREDERICK J
1401 MANATEE AVENUE WEST
SUITE 910
BRADENTON, FL 34205

**DO NOT WRITE
IN THIS SPACE**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MURRELL, FREDERICK J 1401 MANATEE AVENUE WEST, STE. 910 BRADENTON, FL 34205
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SANDS, BILL 1401 MANATEE AVE W., SUITE 910 BRADENTON, FL 34205
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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U00000092231
03/18/04-80041-018 50.00

**DO NOT WRITE
IN THIS SPACE**

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: Frederick J Murrell 3/15/04 941 741 8906
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #