

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 06, 2004 08:00 AM
Secretary of State

DOCUMENT # L01000021938

1. Entity Name
GRISER INVESTMENTS, L.L.C.



Principal Place of Business
**1924 S OSPREY AVE
SUITE 200
SARASOTA, FL 34239**

Mailing Address
**PO BOX 1329
SARASOTA, FL 34230-1329**

DO NOT WRITE IN THIS SPACE



04052004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number
01-0553116

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCGINNESS, W. LEE
1800 SECOND STREET
SUITE 971
SARASOTA, FL 34236**

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

1100100157583
05/06/04-80032-008 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SALSER, RANDAL D
1924 S OSPREY AVE, STE 200
SARASOTA, FL 34239**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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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)(f), 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 609, Florida Statutes.

SIGNATURE:

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

Date

Daytime Phone #

Randy S. Salsar
Randy Salsar

4/29/04

941-316-6827