## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000022301

Entity Name: JERGENZ, LLC

FILED Feb 10, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

16050 WEST ORANGE AVE FORT PIERCE, FL 34945

Current Mailing Address: New Mailing Address:

16050 WEST ORANGE AVE FORT PIERCE, FL 34945

FEI Number: 69-0004279 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JERKINS, W. THOMAS 16050 WEST ORANGE AVE FORT PIERCE, FL 34945

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

## **MANAGING MEMBERS/MEMBERS:**

## ADDITIONS/CHANGES:

itle: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 JERKINS, W. THOMAS
 Name:
 JERKINS, W. THOMAS

 Address:
 16050 WEST ORANGE AVE
 Address:
 2426 PINE AVENUE

 City-St-Zip:
 FORT PIERCE, FL 34945
 City-St-Zip:
 VERO BEACH, FL 32960

Title: MGR (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GENZ, MICHELLE C
 Name:

 Address:
 6190 5TH STREET SW
 Address:

 City-St-Zip:
 VERO BEACH, FL 32968
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: W. THOMAS JERKINS MGR 02/10/2004