## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

**FILED** Apr 26, 2004 08:00 AM Secretary of State

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	JIVIL 1 1					

1. Entity Name

ENVIRONMENTAL BIOTECH OF SARASOTA/MANATEE,

Principal Place of Business

1701 BIOTECH WAY SARASOTA, FL 34243 Mailing Address

1701 BIOTECH WAY SARASOTA, FL 34243



04132004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HADLEY, WILLIAM F

## DO NOT WRITE

	ECH WAY A, FL 34243	IN THIS SPACE					
	named entity submits this statement for the purpose of chains of registered agent.	l anging its registered office or registered agent, or both, in the S	State of Florida. I am familiar with, and accept				
SIGNATURE	Signature Typed or printed name of registered agent and title if applicable	(NOTE Registered Agent signature required when reinstating)	(NOTE Registered Agent signature required when reinstating) DATE				
Fi D	iling Fee is \$50.00 ue by May 1, 2004						
9.	MANAGING MEMBERS/MANAGERS						
TIPLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HADLEY, WILLIAM F 398 BOB WHITE DRIVE SARASOTA, FL 24236	04/2	00000128714 36/04-80049-068 50.00				
TITLE NAME STREET ADDRESS CITY - ST - ZIP							
TITLE NAME STREET ADDRESS CITY STEZIP		DO NO	T WRITE				
TITLE.		IN THIS	SSPACE				

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 it 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.

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS

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