

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000001378

**FILED**  
**Apr 28, 2004**  
**Secretary of State**

**Entity Name:** SEIZE THE DAY, LLC

**Current Principal Place of Business:**

3010 GULF GATE DRIVE  
SARASOTA, FL 34231

**New Principal Place of Business:**

5266 PALM ISLES BLVD  
SARASOTA, FL 34233

**Current Mailing Address:**

3010 GULF GATE DRIVE  
SARASOTA, FL 34231

**New Mailing Address:**

5266 PALM ISLES BLVD  
SARASOTA, FL 34233

**FEI Number:** 75-2984346

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LASSA, ELIZABETH M  
3010 GULF GATE DRIVE  
SARASOTA, FL 34231 US

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

LASSA, ELIZABETH M  
5266 PALM ISLES BLVD  
SARASOTA, FL 34233 US

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:

04/28/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: LASSA, ELIZABETH  
Address: 3010 GULF GATE DR  
City-St-Zip: SARASOTA, FL 34231

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: LASSA, ELIZABETH  
Address: 5266 PALM ISLES BLVD  
City-St-Zip: SARASOTA, FL 34233

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: ELIZABETH LASSA

MGRM

04/28/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date