

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000004313

FILED  
Apr 29, 2004  
Secretary of State

**Entity Name:** LOVE & LOVE ENTERPRISES, LLC

**Current Principal Place of Business:**

3757 FOUNTAINHEAD COURT  
NAPLES, FL 34103

**New Principal Place of Business:**

**Current Mailing Address:**

3757 FOUNTAINHEAD COURT  
NAPLES, FL 34103

**New Mailing Address:**

**FEI Number:** 20-0144125

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOOD, DOUGLAS A ESQ  
C/O SIESKY, PILON & WOOD  
1000 TAMiami TRAIL NORTH, SUITE 201  
NAPLES, FL 34102 US

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

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:**

**Title:** MGRM ( ) Delete  
**Name:** DAMON TODD LOVE,  
**Address:** 3757 FOUNTAINHEAD CT  
**City-St-Zip:** NAPLES, FL 34103

**Title:** MGRM ( ) Delete  
**Name:** ANDREA NICHOLS LOVE,  
**Address:** 3757 FOUNTAINHEAD CT  
**City-St-Zip:** NAPLES, FL 34103

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**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:** ANDREA NICHOLS LOVE

MGRM

04/29/2004

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