


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 20, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000005448 1. Entity Name TAX & ACCOUNTING SOLUTIONS, L.L.C.	
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Principal Place of Business 15881 SHAMROCK DR FT MYERS, FL 33912	Mailing Address 15881 SHAMROCK DR FT MYERS, FL 33912
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**DO NOT WRITE IN THIS SPACE**



01082004 No Chg-LLC      CR2E083 (10/03)

4. FEI Number 02-0564781	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

STROEMER, WENDI D  
15881 SHAMROCK DR  
FT MYERS, FL 33912

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TUSCAN, BECKY J 21131 CAPTAIN NELSON CT ALVA, FL 33920
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM STROEMER, WENDI D 15881 SHAMROCK DR FT MYERS, FL 33912
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01/20/04-80075-021 50.00

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IN THIS SPACE**

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 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: Wendi Stroemer      1/14/04  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #