

**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 29, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # L02000006160

1. Entity Name  
LONGHILL HOLDINGS, LLC



Principal Place of Business  
2 ALHAMBRA PLAZA, SUITE 1202  
CORAL GABLES, FL 33134

Mailing Address  
2 ALHAMBRA PLAZA, SUITE 1202  
CORAL GABLES, FL 33134



01052004 No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
71-0873423

Applied For

Not Applicable

5. Certificate of Status Desired



**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

ALHAMBRA REGISTERED AGENTS, INC.  
2 ALHAMBRA PLAZA, SUITE 1202  
CORAL GABLES, FL 33134

**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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGR  
ARTUSO, JOHN  
555 SE 6TH AVE #5F  
DELRAY BEACH, FL 33483

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
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000000020217  
01/29/04-80057-006 50.00

**DO NOT WRITE  
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)(f), 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

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

DATE