

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 05, 2004 8:00 am
Secretary of State

05-05-2004 90010 026 ****50.00

DOCUMENT # L02000006741					
1. Entity Name ALL POWER, LLC					
Principal Place of Business 2301 FORSYTH RD. ORLANDO, FL 32807			Mailing Address 2301 FORSYTH RD. ORLANDO, FL 32807		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 02-0577149	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
COOPER, DONALD 2301 FORSYTH RD. ORLANDO, FL 32807			Name Street Address (P.O. Box Number is Not Acceptable) City		
COOPER, DONALD 2301 FORSYTH RD. ORLANDO, FL 32807			FL Zip Code		
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 _____ (NOTE: Registered Agent signature required when reinstating)					
Signature, typed or printed name of registered agent and title if applicable.					
DATE					
Filing Fee is \$50.00 Due by May 1, 2004			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE VP	NAME BERBERICH, EDWARD J JR		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
STREET ADDRESS 2301 FORSYTH RD	CITY-ST-ZIP ORLANDO, FL 32807		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
STREET ADDRESS CITY-ST-ZIP	P COOPER, DONALD 2301 FORSYTH RD. ORLANDO, FL 32807		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
STREET ADDRESS CITY-ST-ZIP	V COOPER, RITA 2301 FORSYTH RD. ORLANDO, FL 32807		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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: <i>Rita Michelle Cooper</i> RITA COOPER 4/30/04 407-678-7329					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					