


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 21, 2004 8:00 am
Secretary of State

01-21-2004 90027 036 ****50.00

DOCUMENT # L02000008029

1. Entity Name
 TONEY PENNA DRIVE PARTNERS, LLC



Principal Place of Business 150 TONEY PENNA DRIVE JUPITER, FL 33458	Mailing Address 150 TONEY PENNA DRIVE JUPITER, FL 33458
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DO NOT WRITE IN THIS SPACE



01132004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 01-0645408	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

WHITMIRE, DRENNEN L JR. ESQ
 450 ROYAL PALM WAY, SIXTH FLOOR
 PALM BEACH, FL 33480

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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 MILLET, WALTER 8462 WODDCREST PL HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOLTER, BRAD 2825 HANCOCK CREEK WEST PALM BEACH, FL 33411
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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)(l), 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: Brad Molter **Brad Molter** 1/14/04 561-747-1990
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #