

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008194

FILED  
Mar 03, 2004  
Secretary of State

Entity Name: CONDOS L.L.C.

**Current Principal Place of Business:**

151 SW 5TH CT.  
POMPANO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

151 SW 5TH CT.  
POMPANO BEACH, FL 33060

**New Mailing Address:**

FEI Number: 01-0659235

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ROMANELLI, MICHAEL  
151 SW 5TH CT.  
POMPANO BEACH, FL 33060

**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: ROMANELLI, ALLEN  
Address: 151 SW 5TH CT.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM ( ) Delete  
Name: ROMANELLI, DENNIS  
Address: 151 SW 5TH CT.  
City-St-Zip: POMPANO BEACH, FL 33060

Title: MGRM ( ) Delete  
Name: ROMANELLI, STEVEN  
Address: 1509 RAIL HEAD BLVD.  
City-St-Zip: NAPLES, FL 34110

Title: MGRM ( ) Delete  
Name: ROMANELLI, MICHAEL  
Address: 151 SW 5TH CT.  
City-St-Zip: POMPANO BEACH, FL 33060

**ADDITIONS/CHANGES:**

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

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

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: MICHAEL J. ROMANELLI

MM

03/03/2004

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