

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000008746

Entity Name: WA LOVELL, LLC

FILED  
Apr 30, 2004  
Secretary of State

## Current Principal Place of Business:

3849 NW 9TH AVENUE  
OAKLAND PARK, FL 33309

## New Principal Place of Business:

3939 NW 9TH AVENUE  
OAKLAND PARK, FL 33309

## Current Mailing Address:

3849 NW 9TH AVENUE  
OAKLAND PARK, FL 33309

## New Mailing Address:

3939 NW 9TH AVENUE  
OAKLAND PARK, FL 33309

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOVELL, W.A.  
3939 NW 9TH AVENUE  
OAKLAND PARK, FL 33309 US

## Name and Address of New Registered Agent:

LOVELL, WILLIAM A MR.  
3939 NW 9TH AVENUE  
OAKLAND PARK, FL 33309 US

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: WILLIAM A LOVELL

04/30/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: LOVELL, W.A.  
Address: 3939 NW 9TH AVENUE  
City-St-Zip: OAKLAND PARK, FL 33309

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: LOVELL, WILLIAM A MR.  
Address: 3939 NW 9TH AVENUE  
City-St-Zip: OAKLAND PARK, FL 33309

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: WILLIAM A LOVELL

MGR

04/30/2004

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