


**2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 05, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L02000009198**  
 1. Entity Name  
**DICK GRUENWALD ASSOCIATES, LLC**



Principal Place of Business 4362 NORTHLAKE BLVD., STE. 204 PALM BEACH GARDENS, FL 33410	Mailing Address 4362 NORTHLAKE BLVD., STE. 204 PALM BEACH GARDENS, FL 33410
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**DO NOT WRITE IN THIS SPACE**



03232004 No Chg-LLC      CR2E083 (10/03)

4. FEI Number 73-1639104	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BENDER, LAURA G  
 4362 NORTHLAKE BLVD., STE. 204  
 PALM BEACH GARDENS, FL 33410

**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 \_\_\_\_\_ (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	MGRM DENINNO, DONNA 4362 NORTHLAKE BLVD., SUITE 204 PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM GRUENWALD, RICHARD M 4362 NORTHLAKE BLVD., SUITE 204 PALM BEACH GARDENS, FL 33410
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BENDER, LAURA G 4362 NORTHLAKE BLVD., SUITE 204 PALM BEACH GARDENS, FL 33410
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U00000103989  
 04/05/04-80073-003 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)(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: Laura H. Bender Laura G. Bender      3-31-04      561-622-3200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE      Date      Daytime Phone #