

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000012948

Entity Name: REES 6, LLC

FILED  
Apr 28, 2004  
Secretary of State

**Current Principal Place of Business:**

118 107TH AVE.  
TREASURE ISLAND, FL 33706

**New Principal Place of Business:**

**Current Mailing Address:**

118 107TH AVE.  
TREASURE ISLAND, FL 33706

**New Mailing Address:**

FEI Number: 58-2672871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BYRNE, GAIL  
118 107TH AVE.  
TREASURE ISLAND, FL 33706 US

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

BYRNE, GAIL  
118 107TH AVE.  
TREASURE ISLAND, FL 33706 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: GAIL BYRNE

04/28/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BYRNE, GAIL  
Address: 118 107TH AVE  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: MGRM ( ) Delete  
Name: BYRNE, LESLIE  
Address: 118 107TH AVE  
City-St-Zip: TREASURE ISLAND, FL 33706

**ADDITIONS/CHANGES:**

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: GAIL BYRNE

MGRM

04/28/2004

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