2004 LIMITED LIABILITY COMPANY

ANNUAL REPORT DOCUMENT # L02000014623



FILED Apr 29, 2004 08:00 AM Secretary of State

Not Applicable

Principal Place of Business

1881 TRADE CENTER WAY NAPLES, FL 34109

LONGSHORE LAKE VENTURE, LLC

Mailing Address

1881 TRADE CENTER WAY NAPLES, FL 34109



DO NOT WRITE IN THIS SPACE

5. Name and Address of Current Registered Agent

04212004 No Chg-LLC	CR2E083 (10/03)
4. FEI Number	Applied For

5.	Certificate of Status Desired	\$5.00 Additional Fee Required

04-3684681

FILINGS, INC. 3732 NORTHWEST 16TH STREET FT, LAUDERDALE, FL 33311

SIGNATURE:

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_	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstating)	DATE	
Fi De	ling Fee is \$50.00 ue by May 1, 2004		U00000141689 04/30/04-80021-008 50.00	
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LONGO, DINO 1881 TRADE CENTER WAY NAPLES, FL 34109	· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BARRON, ARTHUR 1881 TRADE CENTER WAY NAPLES, FL 34109			
TITLE NAME STREET ADDRESS CITY - ST - ZIP		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		IN T	HIS SPACE	
TITLE NAME STREET ADDRESS CITY-SI-ZIP				
TITLE NAME STREET ADDRESS CITY - ST - ZIP				
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.				

ING MANAGEN OR AUTHORIZED REPRESENTATIVE