

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000015540

FILED
Jul 06, 2004
Secretary of State

Entity Name: BLOMQUIST-FLORIDA INVESTMENTS TWO L.L.C.

Current Principal Place of Business:

8009 HERB FARM RD.
C/O C. WILLIAM BLOMQUIST
BETHESDA, MD 20817

New Principal Place of Business:

Current Mailing Address:

8009 HERB FARM RD.
C/O C. WILLIAM BLOMQUIST
BETHESDA, MD 20817

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SCHULMAN, BENJAMIN R
4330 SHERIDAN ST.
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

RITCHIE, RONALD W
5129 CASTELLO DRIVE
SUITE 4
NAPLES, FL 34103 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: RONALD W RITCHIE

07/06/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: BLOMQUIST, C. WILLIAM
Address: 8009 HERB FARM RD.
City-St-Zip: BETHESDA, MD 20817

Title: MGR () Delete
Name: BLOMQUIST, DIANE K
Address: 8009 HERB FARM RD.
City-St-Zip: BETHESDA, MD 20817

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: C WILLIAM BLOMQUIST

MGR

07/06/2004

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