## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

## Jan 28, 2004 08:00 AM DOCUMENT # L02000016575 Secretary of State DOWNTOWN VERO INVESTMENTS, LLC Principal Place of Business Mailing Address 2901 OCEAN DRIVE VERO BEACH FL 32963 2901 OCEAN DRIVE VERO BEACH FL 32963 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. CR2E083 (11/03) Applied For City & State City & State 4. FEI Number 02-0631560 Not Applicable Z!o Zιο \$5.00 Additional Country Country 5. Certificate of Status Desired\_ Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent COLLINS, GEORGE G JR Street Address (P.O. Box Number is Not Acceptable) 756 BEACHLAND BOULEVARD VERO BEACH FL Zip Code City 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 | am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registerod agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES 9. MANAGING MEMBERS/MANAGERS 10. ame MGRM ☐ Delete TITLE ☐ Change Addition NAME U00000015482 01/28/04-80016-012 **50.**00 MACWILLIAM, III, ALEX MARKE STREET ADDRESS STREET ADDRESS 2901 OCEAN DRIVE C37Y - 5T - 21P CITY-ST-ZIP VERO BEACH FL 32963 Change TITLE THILE Detete Addition 1 NAME NAME MACWILLIAM, III, ALEX STREET ADDRESS 2901 OCEAN DRIVE STREET ADDRESS CRY-ST-ZIP CHY-ST-ZIP VERO BEACH FL 32963 TITLE ☐ Change Addition THILE Delete NAME NAME RYMES, JEFFREY H STREET ADDRESS STREET ADDRESS 2901 OCEAN DRIVE CITY-ST-ZIP CITY ST-ZIP VERO BEACH FL 32963 TITLE ☐ Oelete BILE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TETLE Change ☐ Addition TITLE NAME MAANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-51-21P Addition ☐ Change TITLE ☐ Delete BEEF MAME NAME STREET ADDRESS STREET ADDRESS CSTY-ST-ZSP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 cath; that I am a managing member or manager of the limited liability company or the receiper of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

- Un William II

**SIGNATURE** 

1-24-04

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**FILED**