

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000019276

Entity Name: AUTCON, LLC

FILED
Jul 21, 2004
Secretary of State

Current Principal Place of Business:

17188 MARYDALE ROAD
PORT CHARLOTTE, FL 33948

New Principal Place of Business:

P.O. BOX 380338
MURDOCK, FL 33938

Current Mailing Address:

17188 MARYDALE ROAD
PORT CHARLOTTE, FL 33948

New Mailing Address:

P.O. BOX 380338
MURDOCK, FL 33938

FEI Number: 11-3652167

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZELLER, CHRISTIAN
929 WESTWINDS BLVD.
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

ZELLER, CHRISTIAN
1605 GULF ROAD
TARPON SPRINGS, FL 34689 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:

07/21/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SPEDDEN, ILSE
Address: 17188 MARYDALE ROAD
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: MGRM () Delete
Name: RASCHKE, DIETER
Address: 17188 MARYDALE ROAD
City-St-Zip: PORT CHARLOTTE, FL 33948

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: SPEDDEN, ILSE
Address: 4582 ULMAN AVE
City-St-Zip: NORTH PORT, FL 34286

Title: MGRM (X) Change () Addition
Name: RASCHKE, DIETER
Address: 4582 ULMAN AVE
City-St-Zip: NORTH PORT, FL 34286

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: ILSE SPEDDEN

MGRM

07/21/2004

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