


# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 07, 2004 8:00 am**  
**Secretary of State**

04-07-2004 90347 009 \*\*\*\*50.00

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|---|---|
| <b>DOCUMENT # L02000029776</b>                      |  |
| 1. Entity Name<br><b>LEAR INVESTMENT GROUP, LLC</b> |   |

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| Principal Place of Business<br><b>1002 MOUNT VERNON STREET<br/>ORLANDO, FL 32803</b> | Mailing Address<br><b>1002 MOUNT VERNON STREET<br/>ORLANDO, FL 32803</b> |
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64000441

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| 2. Principal Place of Business<br><b>833 N Fernussek Ave</b> | 3. Mailing Address<br><b>P.O. Box 536397</b> |
| Suite, Apt. #, etc.  | Suite, Apt. #, etc.                          |

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| City & State<br><b>Orlando Florida</b> | City & State<br><b>Orlando Florida</b> |
| Zip<br><b>32803</b>                    | Zip<br><b>32853</b>                    |
| Country<br><b>USA</b>                  | Country<br><b>USA</b>                  |

03032004 Chg-LLC CR2E083 (10/03)

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| 4. FEI Number<br><b>14-1855589</b>  | Applied For<br><input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b> |  |

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| 6. Name and Address of Current Registered Agent<br><b>SMITH, TODD L<br/>1002 MOUNT VERNON STREET<br/>ORLANDO, FL 32803</b>  |  |
| 7. Name and Address of New Registered Agent<br>Name <b>Bernard C O'Neill Jr</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>2699 Lee Rd Suite 320</b><br>City <b>Winter Park</b> FL Zip Code <b>32789</b> |  |

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| 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.<br><b>Signature: [Signature] 3/15/04</b><br>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE |  |
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| <b>Filing Fee is \$50.00<br/>Due by May 1, 2004</b> | <b>Make check payable to<br/>Florida Department of State</b> |
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| 9. MANAGING MEMBERS/MANAGERS                   |   | 10. ADDITIONS/CHANGES                          |   |
|--|---|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>MGRM<br/>SMITH, TODD LEAR<br/>1002 MOUNT VERNON STREET<br/>ORLANDO, FL 32803</b> <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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| 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. |  |
| <b>SIGNATURE:</b> <b>[Signature]</b><br>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE   | <b>3/11/04</b> <b>321-662-7800</b><br>Date Daytime Phone # |