

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000030681

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: CAN-AM DEVELOPMENT LLC

## Current Principal Place of Business:

1532 SE VILLAGE GREEN DRIVE, SUITE C  
PORT ST LUCIE, FL 34952

## New Principal Place of Business:

1925 SW MACEDO BLVD  
PORT ST LUCIE, FL 34982

## Current Mailing Address:

1529 SE ROYAL GREEN CIR  
SUITE S. 204  
PORT ST LUCIE, FL 34952

## New Mailing Address:

FEI Number: 32-0046801      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHLADNY, RAYMOND  
1532 SE VILLAGE GREEN DRIVE, SUITE C  
PORT ST LUCIE, FL 34952      US

## Name and Address of New Registered Agent:

CHLADNY, RAYMOND  
4540 NE SANDPEBBLE TRACE #306  
STUART, FL 34996      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: RAYMOND CHLADNY

04/30/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR      ( ) Delete  
Name: ROTHE, ROBERT W  
Address: 1529 SE ROYAL GREEN CIR. S.204  
City-St-Zip: PORT ST LUCIE, FL 34952

Title: MGR      ( ) Delete  
Name: CHLADNY, RAYMOND  
Address: 1532 SE VILLAGE GREEN DRIVE SUITE C.  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGR      ( ) Delete  
Name: BRIANS, LARRY  
Address: 1995 SE GRIFFEN AVE.  
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: MGR      ( ) Delete  
Name: MCQUILLAN, WILLIAM  
Address: 3322 SE RIVER VISTA DRIVE  
City-St-Zip: PORT ST LUCIE, FL 34952

## ADDITIONS/CHANGES:

Title: MGR      (X) Change ( ) Addition  
Name: MOROZIUK-ROTHE, JILL W  
Address: 1529 SE ROYAL GREEN CIR. S.204  
City-St-Zip: PORT ST LUCIE, FL 34952

Title: MGR      (X) Change ( ) Addition  
Name: CHLADNY, RAYMOND  
Address: 4540 NE SANDPEBBLE TRACE #306  
City-St-Zip: PORT ST. LUCIE, FL 34996

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: RAYMOND CHLADNY

MGR

04/30/2004

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