

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2004 8:00 am
Secretary of State

03-17-2004 90275 023 ****50.00

DOCUMENT # L02000031278



1. Entity Name
FIRST STATES INVESTORS 3001, LLC

Principal Place of Business
**1725 THE FAIRWAY
JENKINTOWN, PA 19046**

Mailing Address
**1725 THE FAIRWAY
JENKINTOWN, PA 19046**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01232004 Chg-LLC CR2E083 (10/03)

4. FEI Number
46-0509574

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$50.00
Due by May 1, 2004**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
SCHORSCH, NICHOLAS S
1725 FAIRWAY
JENKINTOWN, PA 19046** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRA
BLUMANTHAL, GLENN
1725 FAIRWAY
JENKINTOWN, PA 19046** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRA
CIRRETTI, WILLIAM P
1725 FAIRWAY
JENKINTOWN, PA 19046** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRA
Glenn Blumenthal
1725 The Fairway
Jenkintown, PA 19046** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRA
James Ratner
1725 The Fairway
Jenkintown, PA 19046** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRA
Sonya A. Huffman
1725 The Fairway
Jenkintown, PA 19046** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGRA
Edward J. Matey Jr.
1725 The Fairway
Jenkintown, PA 19046** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #