


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Feb 24, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000031888 1. Entity Name FELLSMERE CONSULTING, LLC	
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Principal Place of Business 241 BRADLEY PLACE PALM BEACH, FL 33480	Mailing Address 241 BRADLEY PLACE PALM BEACH, FL 33480
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DO NOT WRITE IN THIS SPACE



01232004 No Chg-LLC CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent CHAUNCEY, HARRISON K JR 241 BRADLEY PLACE PALM BEACH, FL 33480	DO NOT WRITE IN THIS SPACE
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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.

SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>	(NOTE: Registered Agent signature required when reinstating)	DATE _____
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Filing Fee is \$50.00 Due by May 1, 2004	1100000064476 02/24/04-80013-025 50.00
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM KAUPE, SANDRA T 241 BRADLEY PLACE PALM BEACH, FL 33480
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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)(b), 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: <u>Sandra T. Kaup</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>2/9/04</u> <small>Date</small>	<u>(561) 833-3001</u> <small>Daytime Phone #</small>
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