2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF

Secretary of State **DOCUMENT # L02000032507** 05-03-2004 90125 010 ****50.00 1. Entity Name WWW LC Mailing Address Principal Place of Business 24063241 6126 US 98 EAST 6126 US 98 EAST SEBRING, FL 33870 SEBRING, FL 33870 2. Principal Place of Business 3. Mailing Address 7785 1.0.BOX **LAS** Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E083 (10/03) 04192004 Chg-LLC City & State 4. FEI Number Applied For City & State SEDRING 27-0037803 Not Applicable Debrino Zip Country \$5.00 Additional 5. Certificate of Status Desired MIGHLY000 S HIGH LANDS 7. Name and Address of New Registered Agent ---6. Name and Address of Current Registered Agent FORNEY, MARILYN W 5840 LAKESHORE RD SEBRING, FL 33870 seb<u>ein6</u> 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,)AIE Make check payable to Filing Fee is \$50.00 Florida Department of State Due by May 1, 2004 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. Change MGR · Addition MGR TITLE TITLE Delete FORNEY, DALE F 6126 US 98 EAST COMMUNICIPE 339 FORNEY, MARILYN W PRES NAME NAME 5840 LAKE SHORE RD. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SEBRING, FL 33870 CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change Addition TITLE TITLE FORNEY CAIVIN A. NAME J.P. NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete □ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

NING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

FILED

May 03, 2004 8:00 am



Attachment

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NUM: 602000032507 ST:FL ACTIVE/FL LIM LIAB FLD: 12/04/2002

TOTAL CONTR: 0.00

FEI#: 27-0037803

: WWW LC

PRINCIPAL: 6126 US 98 EAST SEBRING, FL 33870

ADDRESS : FORNEY, MARILYN W RA NAME RA ADDR : 5840 LAKESHORE RD

SEBRING, FL 33870 US

ANN REP

(2003) W 03/20/03

4/19/04

MANAGER/MEMBER DETAIL SCREEN

8:47 AM

CORP NUMBER: L02000032507 CORP NAME: WWW LC TITLE: MGR NAME: FORNEY, MARÎLYN W PRES

5840 LAKE SHORE RD.

SEBRING, FL 33870