

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000033821

**FILED**  
**Apr 30, 2004**  
**Secretary of State**

**Entity Name:** NORTHSIDE VILLAS, LLC

**Current Principal Place of Business:**

2711 ALLEN RD  
TALLAHASSEE, FL 32303

**New Principal Place of Business:**

2711 ALLEN RD  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

2611 ALLEN ROAD  
TALLAHASSEE, FL 32303

**New Mailing Address:**

2711 ALLEN ROAD  
TALLAHASSEE, FL 32312

**FEI Number:** 72-1547658

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JEBARA, NADIM  
2711 ALLEN RD  
TALLAHASSEE, FL 32303 US

**Name and Address of New Registered Agent:**

JEBARA, NADIM  
2711 ALLEN RD  
TALLAHASSEE, FL 32312 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: \_\_\_\_\_

04/30/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BOULOS, ANTOINE M  
Address: 2711 ALLEN RD  
City-St-Zip: TALLAHASSEE, FL 32303

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: BOULOS, ANTOINE M  
Address: 2711 ALLEN RD  
City-St-Zip: TALLAHASSEE, FL 32312

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: ANTOINE BOULOS

MGRM

04/30/2004

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