2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

04-30-2004 90062 009 ****50.00

04272004 Chg-LLC CR2E083 (10/03)

DOCUMENT # L03000001882

1. Entity Name
RANDMAR, LLC

Principal Place of Business	Mailing Address
~~508 EAST OSCEOLA STREET~~ STUART, FL 34994	~~508 EAST OSCEOLA STREET~~ STUART, FL 34994

2. Principal Place of Business	3. Mailing Address
500 SE Dixie Hwy.	Same
Suite, Apt. #, etc.: Suite 2	Suite, Apt. #, etc.:
City & State: Stuart, FL	City & State:
Zip: 34994 Country: USA	Zip: Country:

4. FEI Number: 56-2423105 ☐ 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
KRAMER, ROBERT S 853 S.E. MONTEREY COMMONS BLVD. STUART, FL 34996	Name: Thomas Fogt, Esq. Street Address (P.O. Box Number is Not Acceptable): 700 Colorado Ave. City: Stuart FL Zip Code: 34994

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] 4/28/04
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			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HANSBROUGH, RANDOLPH V 508 EAST OSCEOLA STREET STUART, FL 34994	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Hansbrough, Randolph V 500 SE Dixie Hwy, Suite 2 Stuart, FL 34994	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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: Randolph V. Hansbrough 4-27-04 772 287 7701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #