## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## **DOCUMENT # L03000002387** 02-03-2004 90049 009 \*\*\*\*50.00 WIEBEL HENNELLS CARUFE URISH POPECK & CO., LLC Principal Place of Business Mailing Address 34000348 9240 BONITA BEACH ROAD, SUITE 3305 9240 BONITA BEACH ROAD, SUITE 3305 BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34135 2. Principal Place of Business 1. Mailing Address Suite. Apt. #, etc. Suite, Apl. II, etc. -Chg-LLC----CH2E083 (10/03) City & State City & State Applied For 0503189 Not Applicable Country \$5.00 Additional 7. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent WIEBEL, DOUGLAS E Street Address (P.O. Box Number is Not Acceptable) 9240 BONITA BEACH ROAD, SUITE 3305 BONITA SPRINGS, FL 34135 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, lyphid or presed filters of registered agent and title if applicable e check payable to Filing Fee is \$50.00 Due by May 1, 2004 MANAGING MEMBERS/MANAGERS 9. ADDITIONS/CHANGES TILE ☐ Defete TIRE ☐ Change WIEBEL, DOUGLAS E HAME 9240 BONITA BEACH ROAD, SUITE 3305 STREET ADDRESS STREET ADDRESS CITY-ST-ZP BONITA SPRINGS, FL 34135 CITY-ST-ZP MLE TITLE ☐ Charge ☐ Addition NAME MAKE STREET AUTORESS STREET ADDRESS CITY-ST-ZP CITY-SI-76 ☐ Defete NAME MAC: STREET ADDRESS STREET ACCORESS CITY-ST-ZP. .. CITY-ST-ZIP TILE C Ocide TEF ☐ Charge ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP Change - - Addition TILE TILE. NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CTY-ST-ZP Addition IIILE ☐ Ordete TITLE · 🔲 Change **WAR** MULE STREET ADDRESS STREET ADDRESS 4.10% CITY-ST-OP ดาข<sup>ึ</sup>้งรา-สค 11. I hereby certify that the information supplied with this fiting 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. Druglas E Wiebel

FILED Feb 12, 2004 8:00 am

**Secretary of State** 



Attachment 34000348

## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

February 5, 2004

WIEBEL HENNELLS CARUFE URISH POPECK & CO., LLC 9240 BONITA BEACH ROAD, SUITE 3305 BONITA SPRINGS, FL 34135

Subject: WIEBEL HENNELLS CARUFE URISH POPECK & CO., LLC

Reference Number:

L03000002387

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

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ANNUAL REPORTS SECTION