# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Feb 09, 2004**
**Secretary of State**

DOCUMENT# L03000005425

**Entity Name:** KANTZIOS FAMILY LLC

**Current Principal Place of Business:**

2626 VELVENTOS DR.
CLEARWATER, FL 33761 US

**New Principal Place of Business:**

2626 VELVENTOS DR
CLEARWATER, FL 33761 US

**Current Mailing Address:**

2626 VELVENTOS DR.
CLEARWATER, FL 33761 US

**New Mailing Address:**

2626 VELVENTOS DR
CLEARWATER, FL 33761 US

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

GEORGE G. PAPPAS, P.A.
901 N. HERCULES AVE.
STE. D
CLEARWATER, FL 33765 US

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

GEORGE G. PAPPAS, P.A.
901 N HERCULES AVE
SUITE C
CLEARWATER, FL 33765 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: GEORGE G. PAPPAS, ESQ. 02/09/2004
Electronic Signature of Registered Agent Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition
Name: KANTZIOS, JIM
Address: 2626 VELVENTOS DR
City-St-Zip: CLEARWATER, FL 33761 US

Title: MGRM ( ) Change (X) Addition
Name: KANTZIOS, MARIA
Address: 2626 VELVENTOS DR
City-St-Zip: CLEARWATER, FL 33761 US

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: JIM KANTZIOS MGRM 02/09/2004
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date