## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

**SIGNATURE** 

## Feb 03, 2004 08:00 AM DOCUMENT # L03000006857 · Secretary of State 1. Entity Name 301 NBC, LLC Principal Place of Business Mailing Address 3034 GORDON DRIVE 3034 GORDON DRIVE NAPLES FL 34102 NAPLES FL 34102 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. CR2E083 (11/03) Applied For City & State City & State 4. FEI Number Not Applicable Zιρ Country Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 5. Name and Address of Current Registered Agent Name BAVIELLO, MICHAEL A JR., ESQ Street Address (P.O. Box Number is Not Acceptable) 1025 FIFTH AVENUE NORTH NAPLES FL 34102 City 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 Signature, typed or printed name of registerod agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 MANAGING MEMBERS/MANAGERS 9, 10. ADDITIONS/CHANGES TITLE MGRM TITLE Change Addition Defete CHESTERTON, ARTHUR W NAME NAME U00000028629 STREET ADDRESS 3034 GORDON DRIVE STREET ADDRESS 02/03/04-80015-005 50.00 CITY-ST-2IP NAPLES FL 34102 CITY-ST-ZIP ☐ Defete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS City-57-7(P CITY-ST-ZIP TITLE Defete RITLE Change Addition NAME MANAE STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP CITY-ST-ZIP 3JTH ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-ST-78P BILE TITLE ☐ Change □ Detete ☐ Addition ስለልአም NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 03TY-53-73P ☐ Change ☐ Addition 3333 Delete TSTSF NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CATY-ST-ZIP 11. Thereby 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 entrusted empowered to execute this report as required by Chapter 608, Florida Statutes.

**FILED** 

KTHUR W. CHESTERTON 1/2/04 2392631250