

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000008701

FILED  
Feb 05, 2004  
Secretary of State

**Entity Name:** ESUES TECHNICAL SOLUTIONS, LLC

**Current Principal Place of Business:**

512 LAKE ASBURY DRIVE  
GREEN COVE SPRINGS, FL 32043

**New Principal Place of Business:**

512 LAKE ASBURY DRIVE  
GREEN COVE SPRINGS, FL 32043 US

**Current Mailing Address:**

512 LAKE ASBURY DRIVE  
GREEN COVE SPRINGS, FL 32043

**New Mailing Address:**

512 LAKE ASBURY DRIVE  
GREEN COVE SPRINGS, FL 32043 US

**FEI Number:** 05-0559177

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

CAPLAN, HOWARD A ATTY PA  
3900 ATLANTIC BLVD  
JACKSONVILLE, FL 32207 US

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

CAPLAN, HOWARD A ATTY PA  
6260 DUPONT STATION COURT  
SUITE C  
JACKSONVILLE, FL 32217 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:

02/05/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

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

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Change (X) Addition  
Name: SHEAHAN, E. SUSAN  
Address: 512 LAKE ASBURY DR  
City-St-Zip: GREEN COVE SPRINGS, FL 32043

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: E. SUSAN SHEAHAN

MGRM

02/05/2004

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