

FILED
Aug 09, 2004 8:00 am
Secretary of State

06-08-2004 90193 001 ***165.00

2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT

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6/8/2

DOCUMENT # L03000010279			
1. Entity Name ACTION REALTY FLORIDA, LLC			
Principal Place of Business 900 DREW STREET, STE. 2 CLEARWATER, FL 33755		Mailing Address 900 DREW STREET, STE. 2 CLEARWATER, FL 33755	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Country	
4. Filing Number 502397697		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent STAACK, JAMES A. 900 DREW STREET, STE. 2 CLEARWATER, FL 33755		7. Name and Address of New Registered Agent	
Name		Street Address (P.O. Box Number is Not Acceptable)	
City		FL 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, the registered agent.			
SIGNATURE: <i>[Signature]</i> DATE: <i>6-15-04</i>			
Filing Fee is \$50.00 Due by September 8, 2004		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	
MANAGING MEMBER - <i>6/15/04</i> BRENDA ROVAS 900 DREW ST. #2 CLEARWATER, FL 33755		☐ Change ☐ Addition	
MANAGING MEMBER - <i>6/15/04</i> JAMES A. STAACK 900 DREW ST. #2 CLEARWATER, FL 33755		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ Change ☐ Addition	
☐ Delete		☐ 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)(b), 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 605, Florida Statutes.			
SIGNATURE: <i>[Signature]</i> <i>6-15-04</i>		Date	