2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jan 23, 2004 8:00 am Secretary of State

DOCUN 1. Entity Name A P ENTE	е	# L0300001 s, LLC	1516			01-23-2004 90122 043 ****55.00				
Principal Place of Business Mailing Address										
3280 FAIRLA WELLINGTON,			3280 FAIRLANE FARMS ROAD Wellington, FL 33414							
WELLING TON,	, 1 L 3341		WELLINGTON, IE 33414	WELLINGTON, I'E 33414				2400355	.	
2. Principal Pl	lace of Busin	ness	3. Mailing Address							
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Suite, Apt. #, etc.			Suite, Apt. #, etc.	Suite, Apt. #, etc.		01182004 Chg-LLC CR2E083 (10/03)				
City & State			City & State Beverly			4. FEI Numbe		1	plied For t Applicable	
Zip	Zip Country		Zip _	Country	ountry VSA		of Status Desired	\$5.00 Add	itional	
6. Name and Address of Current F			o 1915	L		7. Name and Address of New Registered Agent				
al a second	-	and the second s	912 1199 L	Nam		·	The state of the s			
DOORLY, A		RMS ROAD		Street Address ((P.O. Box Number is Not Acceptable)			
WELLINGT	TON, FL	33414								
				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 registered agent.										
SIGNATURE Signature, typed or printed name of registered agent and titla if applicable. / (NOTE: Registered Agent signature required when reinstating) DATE										
Du		ls \$50.00 y 1, 2004				4.		check payable to Department of State	•	
MANAGING MEMBER			DEDG (ALAMA GERO	T 46			ADDITIONS !	OLIANOEC		
9. TIŤLE	MGR	MANAGING MEM	BERS/MANAGERS Delete	10.	1		ADDITIONS/0	CHANGES Change	Addition	
NAME		, JOHN F		NAME	20	a E.c.	× Street	-	_	
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NAME STREET ADDRESS		The second second		STREET ADDRE	ss			.•		
CITY-ST-ZIP	25	***		CITY-ST-ZIP			3		•	
11. I hereby 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 ecciver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.										