

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000012533

FILED  
Apr 28, 2004  
Secretary of State

Entity Name: ROAMER INDUSTRIES, LLC

## Current Principal Place of Business:

420 EAST VENICE AVENUE  
VENICE, FL 34292

## New Principal Place of Business:

3440 TECHNOLOGY DR  
NOKOMIS, FL 34275

## Current Mailing Address:

420 EAST VENICE AVENUE  
VENICE, FL 34292

## New Mailing Address:

3440 TECHNOLOGY DR  
NOKOMIS, FL 34275

FEI Number: 57-1169777

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HORVATH, JEFFREY J  
420 EAST VENICE AVENUE  
VENICE, FL 34292

## Name and Address of New Registered Agent:

HORVATH, JEFFREY J  
3440 TECHNOLOGY DR  
NOKOMIS, FL 34275

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:

04/28/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: HORVATH, JEFFREY J  
Address: 3440 TECHNOLOGY DRIVE  
City-St-Zip: NOKOMIS, FL 34275

Title: MGR ( ) Delete  
Name: COQUILLARD, JANIS  
Address: 3440 TECHNOLOGY DRIVE  
City-St-Zip: NOKOMIS, FL 34275

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JANIS L COQUILLARD

MGR

04/28/2004

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