

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000013717

**FILED**  
**Apr 30, 2004**  
**Secretary of State**

**Entity Name:** BENNER ENTERPRISES, L.L.C.

**Current Principal Place of Business:**

3722 EAGLEWOOD STREET  
VALRICO, FL 33594

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 89116  
TAMPA, FL 33689

**New Mailing Address:**

FEI Number: 59-3727003

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BENNER, WILLIAM A  
3722 EAGLEWOOD STREET  
VALRICO, FL 33594 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: BENNER, WILLIAM A  
Address: 3722 EAGLEWOOD STREET  
City-St-Zip: VALRICO, FL 33594

Title: MGRM ( ) Delete  
Name: BENNER, KIMBERLY A  
Address: 3722 EAGLEWOOD STREET  
City-St-Zip: VALRICO, FL 33594

**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: KIMBERLY BENNER

MGRM

04/30/2004

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