

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000014084

Entity Name: ILLUMIVATIONS, LLC

FILED  
Jan 31, 2004  
Secretary of State

## Current Principal Place of Business:

7217 49TH PLACE EAST  
PALMETTO, FL 34221

## New Principal Place of Business:

## Current Mailing Address:

7217 49TH PLACE EAST  
PALMETTO, FL 34221

## New Mailing Address:

FEI Number: 02-0687620

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SPIRE, DAVID L  
7217 49TH PLACE EAST  
PALMETTO, FL 34221 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

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

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

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: SPIRE, DEBRA K MGR  
Address: 4201 32ND LANE EAST  
City-St-Zip: BRADENTON, FL 34208

Title: MGRM ( ) Change (X) Addition  
Name: SPIRE, DAVID MGR  
Address: 7217 49TH PLACE EAST  
City-St-Zip: PALMETTO, FL 34221

Title: MGR ( ) Change (X) Addition  
Name: KEVON, SPIRE L MGR  
Address: 4201 32ND LANE EAST  
City-St-Zip: BRADENTON, FL 34208

Title: MGR ( ) Change (X) Addition  
Name: SPIRE, MELANIE L  
Address: 7217 49TH PLACE EAST  
City-St-Zip: PALMETTO, FL 34221

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: DAVID SPIRE

MGRM

01/31/2004

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