

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

5/31

**FILED**  
**Jun 04, 2004 8:00 am**  
**Secretary of State**

05-03-2004 90127 039 \*\*\*\*50.00

**34008126**



<b>DOCUMENT # L03000017776</b> 1. Entity Name <b>MARING QLAND LLC</b>					
Principal Place of Business <b>1126 COUNTRY CLUB BLVD CAPE CORAL, FL 33990</b>			Mailing Address <b>1126 COUNTRY CLUB BLVD CAPE CORAL, FL 33990</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>20-1043421</b>	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>MEHMEDBASIC, SEAD 1126 COUNTRY CLUB BLVD CAPE CORAL, FL 33990</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when renewing) DATE _____					
<b>Filing Fee is \$50.00 Due by May 1, 2004</b>		Make check payable to <b>Florida Department of State</b>			
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>MEMBER Sead Mehmedbasic 1126 Country Club Blvd Cape Coral, FL 33990</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<b>MANAGER SEAD MEHMEDBASIC 1126 COUNTRY CLUB BLVD, CC, F3 33990</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: <i>[Signature]</i> <b>M. MEHMEDBASIC</b>			Date <b>6/30/04</b> (289) (323-7000)		

Attachment  
34008126

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR  
BOTH FOR LIMITED LIABILITY COMPANY**

*Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the limited liability company is: MARING QLAND LLC
2. The mailing address of the limited liability company is : 1126 COUNTRY CLUB BLVD  
CAPE CORAL, FL 33990

5/16/03

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3. Date of filing/registration in Florida
4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the  
Florida Department of State:

SEAD MEHMEDBASIC

Name

1126 COUNTRY CLUB BLVD

Address

CAPE CORAL, FL 33990

City, State and Zip

6. The name and address of the new registered agent and/or office:

ZALTKO TRTAK

Name

1126 COUNTRY CLUB BLVD

Florida street address (P.O. Box NOT acceptable)

CAPE CORAL, FL 33990

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

✓  
(Signature of a member or authorized representative of a member)

SEAD MEHMEDBASIC

(Printed or typed name of signee)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

✓✓ 2 Thak  
(Signature of Registered Agent)

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**