

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019154

FILED  
Jul 20, 2004  
Secretary of State

Entity Name: STRAWBERRY VILLAGE LLC

## Current Principal Place of Business:

PO BOX 1096  
BRANDON, FL 33509 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 1096  
BRANDON, FL 33509 US

## New Mailing Address:

FEI Number: 05-0573880

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MASSARO, JOSEPH J  
3510 SHADOWOOD DRIVE  
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: MASSARO, JOSEPH J  
Address: 3510 SHADOWOOD DRIVE  
City-St-Zip: VALRICO, FL 33594 US

Title: MGRM ( ) Delete  
Name: ABRAHAM, KELLY R  
Address: 12911 SHADOW RUN BLVD  
City-St-Zip: RIVERVIEW, FL 33569 US

Title: MGR ( ) Delete  
Name: MELLODY, JAMES P JR  
Address: 5205 CULASAJA CIR  
City-St-Zip: VALRICO, FL 33594 US

Title: MGR ( ) Delete  
Name: MELLODY, SEAN B  
Address: 2504 OBRAPIA ST.  
City-St-Zip: TAMPA, FL 33629 US

Title: MGR ( ) Delete  
Name: TEMPLE, JIMMY L  
Address: 4803 CHARRO LANE  
City-St-Zip: PLANT CITY, FL 33565 US

Title: MGR ( ) Delete  
Name: ERICKSON, MICHAEL A  
Address: 13642 LARAWAY DRIVE  
City-St-Zip: RIVERVIEW, FL 33569 US

## ADDITIONS/CHANGES:

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

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

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

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

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: KELLY R. ABRAHAM

MGRM

07/20/2004

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