

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000020038

1. Entity Name
NETSTAR UNDERWRITERS, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

04 APR 15 PM 4:11

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Principal Place of Business
101 NORTH MONROE STREET, SUITE 800
P.O. DRAWER 229
TALLAHASSEE, FL 32302-0229

Mailing Address
101 NORTH MONROE STREET, SUITE 800
P.O. DRAWER 229
TALLAHASSEE, FL 32302-0229

2. Principal Place of Business
5951 CATTLE RIDGE BLVD
Suite, Apt. #, etc.
200

3. Mailing Address
5951 CATTLE RIDGE BLVD
Suite, Apt. #, etc.
200

City & State
SARASOTA, FL

City & State
SARASOTA, FL

Zip
34232

Country

Zip
34232

Country

03232004 Chg-LLC CR2E083 (10/03)

4. FEI Number
05-0564809

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
MCCONNAUGHAY, JAMES N
101 NORTH MONROE STREET, SUITE 900
TALLAHASSEE, FL 32301

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL 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
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

MANAGING MEMBER
ANDREW W. OLWERT, III
5951 CATTLE RIDGE BLVD, # 200
SARASOTA, FL 34232

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04/15/04--01015--005 ***537.50

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/25/04

Date

941-309-6104

Daytime Phone #