

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 17, 2004 8:00 am**  
**Secretary of State**

02-17-2004 90192 016 \*\*\*\*50.00

**DOCUMENT # L03000021041**

1. Entity Name  
**DUVAL STATION ACQUISITION, LLC**



Principal Place of Business  
**OLD MILL PLAZA, STE. A  
2100 HIGHWAY 35  
SEA GIRT, NJ 08750**

Mailing Address  
**OLD MILL PLAZA, STE. A  
2100 HIGHWAY 35  
SEA GIRT, NJ 08750**

**24011476**



2. Principal Place of Business

**Duval Station Acq, LLC**

Suite, Apt. #, etc.

**8 Industrial way E. 2nd fl**

City & State

**Eaton town NJ**

Zip

**07024**

Country

3. Mailing Address

**Duval Station Acq, LLC**

Suite, Apt. #, etc.

**8 Industrial way E. 2nd floor**

City & State

**Eaton town NJ**

Zip

**07024**

Country

01232004

Chg-LLC

CR2E083 (10/03)

4. FEI Number

**33-1061734**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

**ANSBACHER, LEWIS ESQ  
C/O ANSBACHER & SCHNEIDER  
5150 BELFORT RD. SOUTH  
JACKSONVILLE, FL 32256**

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

TITLE **member** ☐ Delete  
NAME **Daniel massry**  
STREET ADDRESS **8 Industrial way East 2nd floor**  
CITY-ST-ZIP **Eaton town NJ 07024**

TITLE **member** ☐ Delete  
NAME **Mark massry**  
STREET ADDRESS **8 Industrial way East 2nd floor**  
CITY-ST-ZIP **Eaton town NJ 07024**

TITLE **member** ☐ Delete  
NAME **Isaac massry**  
STREET ADDRESS **8 Industrial way East 2nd fl**  
CITY-ST-ZIP **Eaton town NJ 07024**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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]*

**2/4/04**

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

Date

Daytime Phone #