

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021188

FILED
Apr 30, 2004
Secretary of State

Entity Name: 530 FISHERS LLC

Current Principal Place of Business:

6 HILLOCK LANE
CHADDS FORD, PA 19317

New Principal Place of Business:

Current Mailing Address:

6 HILLOCK LANE
CHADDS FORD, PA 19317

New Mailing Address:

FEI Number: 20-0044918 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISS, LISA R
86 LADOGA AVENUE
TAMPA, FL 33606 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: MGR () Delete
Name: WEISS FAMILY LIMITED, PARTNERSHIP
Address: 6 HILLOCK LANE
City-St-Zip: CHADDS FORD, PA 19317

Title: MGR () Delete
Name: BONNER FAMILY PARTNE, RSHIP
Address: 6 HILLOCK LANE
City-St-Zip: CHADDS FORD, PA 19317

Title: MGR () Delete
Name: DOLAN, MICHAEL
Address: 6 HILLOCK LANE
City-St-Zip: CHADDS FORD, PA 19317

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:

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: DONALD J WEISS

MGR

04/30/2004

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