

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000021241

FILED
Jan 14, 2004
Secretary of State

Entity Name: AMELIA INVESTMENTS, LLC

Current Principal Place of Business:

P.O. BOX 158
FRANKFORD, WV 24938

New Principal Place of Business:

8320 GULF BLVD
ST PETE BEACH, FL 33706 US

Current Mailing Address:

P.O. BOX 158
FRANKFORD, WV 24938

New Mailing Address:

8320 GULF BLVD
ST PETE BEACH, FL 33706 US

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

Name and Address of Current Registered Agent:

FRAZIER, JOHN ESQ
10225 ULMERTON RD., BLDG. 11
LARGO, FL 33771 US

Name and Address of New Registered Agent:

ANTHONY, ANDREW
8320 GULF BLVD
ST. PETE BEACH, FL 33706 US

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: ANDREW ANTHONY

01/14/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ANTHONY, ANDREW
Address: P.O. BOX 158
City-St-Zip: FRANKFORD, WV 24938

Title: MGRM () Delete
Name: ANTHONY, VICKY J
Address: P.O. BOX 158
City-St-Zip: FRANKFORD, WV 24938

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: ANTHONY, ANDREW
Address: 8320 GULF BLVD
City-St-Zip: ST PETE BEACH, FL 33706 US

Title: MGRM (X) Change () Addition
Name: ANTHONY, VICKY J
Address: 8320 GULF BLVD
City-St-Zip: ST PETE BEACH, FL 33706 US

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: ANDREW ANTHONY/VICKY J ANTHONY

MGRM

01/14/2004

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