## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L03000021576

City-St-Zip:

FILED Apr 07, 2004 Secretary of State

Entity Name: NEVIS CONSULTING LLC **Current Principal Place of Business: New Principal Place of Business:** 13599 PERDIDO KEY DR., UNIT TPH3C PERDIDO KEY, FL 32507 **Current Mailing Address: New Mailing Address:** 13599 PERDIDO KEY DR., UNIT TPH3C PERDIDO KEY, FL 32507 FEI Number: 38-3682992 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TRIMBOLI, IDA 13599 PERDIDO KEY DR., UNIT TPH3C PERDIDO KEY, FL 32507 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: ADDITIONS/CHANGES:** () Delete ( ) Change (X) Addition TRIMBOLI, IDA Name: Name: Address: Address: 7292 CAPTAIN KIDD REEF City-St-Zip: City-St-Zip: PERDIDO KEY, FL 32507 US Title: Title: MGR ( ) Change (X) Addition ( ) Delete Name: Name: TRIMBOLI, ANTHONY JR Address: Address: 7501 STONELEIGH DR City-St-Zip: City-St-Zip: HARAHAN, LA 70123 US Title: () Delete Title: MGR ( ) Change (X) Addition Name: TRIMBOLI, NICHOLAS Name: Address: Address: 7501 STONELEIGH DR

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.

City-St-Zip:

HARAHAN, LA 70123 US

SIGNATURE: IDA TRIMBOLI MGR 04/07/2004