

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000022987

FILED  
Aug 31, 2004  
Secretary of State

Entity Name: ARBOGAS ENTERPRISES, LLC

## Current Principal Place of Business:

307 SOUTHWEST LAKE FOREST WAY  
ST. LUCIE WEST, FL 34986 US

## New Principal Place of Business:

1640 COPENHAVER RD  
FT. PIERCE, FL 34945 US

## Current Mailing Address:

925 OAK GLEN MANOR CT.  
ST. LOUIS, MO 63122 US

## New Mailing Address:

FEI Number: 20-0055019      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CALDERON, ROBERT  
307 SOUTHWEST LAKE FOREST WAY  
ST. LUCIE WEST, FL 63122 US

## Name and Address of New Registered Agent:

HARGIS, ROBERT  
1640 COPENHAVER RD.  
FT. PIERCE, FL 34945 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: ROBERT HARGIS

08/31/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: LOCKWOOD, JOAN M  
Address: 925 OAK GLEN MANOR CT.  
City-St-Zip: ST. LOUIS, MO 63122 US

Title: MGRM (X) Delete  
Name: DUFAUX, SHALEN  
Address: 1819 BISSONNET  
City-St-Zip: HOUSTON, TX 77005

Title: MGRM (X) Delete  
Name: MILLMAN, MEGAN  
Address: 3823 HOLLY HILLS  
City-St-Zip: ST. LOUIS, MO 63116 US

Title: MGRM (X) Delete  
Name: CALDERON, ROBERT  
Address: 307 SOUTHWEST LAKE FOREST WAY  
City-St-Zip: ST. LUCIE WEST, FL 34986 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LOCKWOOD, ROBERT W  
Address: 925 OAK GLEN MANOR CT.  
City-St-Zip: ST. LOUIS, MO 63122 US

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: ROBERT LOCKWOOD

MGRM

08/31/2004

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