2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED Feb 11, 2004 08:00 AM DOCUMENT # L03000023593 1. Entity Name **Secretary of State 404 LLC** Principal Place of Business Mailing Address 2336 BLANDA ST. 2336 BLANDA ST. ORLANDO FL 32839 ORLANDO FL 32839 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E083 (11/03) City & State City & State 4. FEI Number Applied For Not Applicable Ζiρ Country Zıp Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENDER, JEFFREY A Street Address (P.O. Box Number is Not Acceptable) 2336 BLÁNDA ST. ORLANDO FL 32839 City 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 Squature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004 MANAGING MEMBERS/MANAGERS 9. 10 ADDITIONS/CHANGES TITLE MGR TIME ☐ Delete Change ☐ Addition NAME BENDER, JEFFREY A NAME STREET ADDRESS 2336 BLANDA ST. STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32839 CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME U00000046874 STREET ADDRESS STREET ADDRESS 02/12/04-80018-004 50.00 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change | Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME. NAME. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.