

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

4/30

FILED
May 25, 2004 8:00 am
Secretary of State

04-30-2004 90064 012 ****50.00

DOCUMENT # L03000027481

1. Entity Name

UNIT 603, 2100 TOWERS CONDOMINIUM, LLC



Principal Place of Business

7 COUNTRY CLUB ROAD
COCOA BEACH FL 32931
US

Mailing Address

7 COUNTRY CLUB ROAD
COCOA BEACH FL 32931
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

20-0179852

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LYNCH, KEVIN M
7 COUNTRY CLUB ROAD
COCOA BEACH FL 32933-1

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2004

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE MGR ☐ Delete
NAME LYNCH, KEVIN M
STREET ADDRESS 7 COUNTRY CLUB ROAD
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGR ☐ Delete
NAME LYNCH, JULIE M
STREET ADDRESS 7 COUNTRY CLUB ROAD
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Kevin M. Lynch, manager 4/15/04

Due

Daytime Phone #