

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90254 034 ****55.00

DOCUMENT # L03000028108

1. Entity Name
RIEDEL AND ASSOCIATES, L.L.C.



Principal Place of Business
5337 COCOA COURT
CAPE CORAL, FL 33904

Mailing Address
5337 COCOA COURT
CAPE CORAL, FL 33904



2. Principal Place of Business
915 S.E. 14th Pl. H 16
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Cape Coral, FL

City & State

03302004 Chg-LLC CR2E083 (10/03)

4. FEI Number 36-4537660

Applied For
Not Applicable

Zip 33990 Country USA

Zip 33990 Country Lee

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

RIEDEL, STEVEN J
5337 COCOA COURT
CAPE CORAL, FL 33904

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 *Steven J. Riedel*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/30/04
DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM
NAME RIEDEL, STEVEN J
STREET ADDRESS 5337 COCOA COURT
CITY-ST-ZIP CAPE CORAL, FL 33904 ☐ Delete

TITLE Owner - President
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE MGRM
NAME RIEDEL, PENNY ANN
STREET ADDRESS 5337 COCOA COURT
CITY-ST-ZIP CAPE CORAL, FL 33904 ☐ Delete

TITLE Owner Vice President
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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

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

Penny Ann Riedel, Vice President 3/30/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #