2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 22, 2004 8:00 am
Secretary of State
07-12-2004 90133 048 ****50.00

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07062004 Chg-LLC CR2E083 (10/03)

DOCUMENT # L03000028919

1. Entity Name
2617 PINEWOOD, LLC

Principal Place of Business	Mailing Address
2617 PINEWOOD AVE. WEST PALM BEACH, FL 33407	2617 PINEWOOD AVE. WEST PALM BEACH, FL 33407

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 56-2385004 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HENTSCHL, CHRISTIAN
2617 PINEWOOD AVE.
WEST PALM BEACH, FL 33407

7. Name and Address of New Registered Agent

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 ____________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by September 8, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Christian Hentschl 163 Hampton Circle Jupiter, FL 33456	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Matthew Mayfield 129 Gregory Rd WPB, FL 33405	☐ Delete	TITLE 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 NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME 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: ____________________
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

Attachment

34009481

C.R. COOPER, CPA, PA
1495 FOREST HILL BLVD STE B
WEST PALM BEACH, FLORIDA 33406

American Institute of
Certified Public Accountants

Florida Institute of
Certified Public Accountants

(561) 964-6927
(561) 432-0008

FAX (561) 433-3596

July 6, 2004

Department of State
Division of Corporations
P.O. Box 6478
Tallahassee, Florida 32314

Taxpayer: 2617 Pinewood, LLC.
Document #: L03000028919
FEIN: 56-2385004
Tax Form: UBR
Tax Period: 2004

To Whom It May Concern:

We have enclosed check # in the amount of $50.00 for the Annual Renewal of 2617 Pinewood, LLC, and Document # L03000028919.

Please abate the penalty as Mr. Hentschl did not receive the original UBR. The LLC is newly formed and did not intentionally avoid the filing.

Thank you for your prompt attention to this matter. Please contact our office if any further information or explanation is required.

Respectfully,

C. R. Cooper, CPA

Encl.

cc