2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State
02-02-2004 90210 029 ****50.00

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1. Entity Name
VAN WYK HOLDINGS, LLC

Principal Place of Business	Mailing Address
632 GUNDERSON AVE. OAK PARK, IL 60304	632 GUNDERSON AVE. OAK PARK, IL 60304

01072004 Chg-LLC CR2E083 (10/03)

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 32-0092137 ☐ 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
ROLAND, DOUGLAS C 500 E. KENNEDY BLVD. TAMPA, FL 33602	Name: Mark Van Wyk Street Address (P.O. Box Number is Not Acceptable): 8104 Pond Shadow Lane City: Tampa FL Zip Code: 33635

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: Mark Van Wyk (signature) DATE: Jan. 22, 2004
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 May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Betty Van Wyk, Trustee Betty Van Wyk Declaration of Trust Dated 12/8/2000 632 Gunderson Oak Park IL 60304 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		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: Betty Van Wyk (signature) Betty Van Wyk 1/28/04 7083866170
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #