

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000037106

Entity Name: BUCKEYE NORTH, LLC

FILED  
Aug 17, 2004  
Secretary of State

**Current Principal Place of Business:**

21555 COUNTY ROAD 675  
MYAKKA CITY, FL 34251

**New Principal Place of Business:**

**Current Mailing Address:**

21555 COUNTY ROAD 675  
MYAKKA CITY, FL 34251

**New Mailing Address:**

FEI Number: 20-0324973

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCGUIRE, HUGH E JR  
21555 COUNTY ROAD 675  
MYAKKA CITY, FL 34251 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: MCGUIRE, JR., HUGH E  
Address: 21555 COUNTY ROAD 675  
City-St-Zip: MYAKKA CITY, FL 34251

Title: MGR ( ) Change (X) Addition  
Name: FALKNER, JOHN  
Address: 4555 VERNA BETHANY RD  
City-St-Zip: MYAKKA CITY, FL 34251

Title: MGR ( ) Change (X) Addition  
Name: VERGARA, EMILIO D  
Address: 21555 COUNTY ROAD 675  
City-St-Zip: MYAKKA CITY, FL 34251

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: HUGH E. MCGUIRE, JR.

MGR

08/17/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date