

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000043626

**FILED**  
**Apr 27, 2004**  
**Secretary of State**

**Entity Name:** ALBIOREX, LLC

**Current Principal Place of Business:**

3281 LANDMARK DRIVE  
CLEARWATER, FL 33761 US

**New Principal Place of Business:**

**Current Mailing Address:**

3281 LANDMARK DRIVE  
CLEARWATER, FL 33761 US

**New Mailing Address:**

**FEI Number:** 51-0491063

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DICKSON, LEO J  
200 CENTRAL AVENUE  
SUITE 1600  
ST. PETERSBURG, FL 33701 US

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

WEILAND, DOUGLAS J  
3281 LANDMARK DRIVE  
CLEARWATER, FL 33761 US

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: DOUGLAS J. WEILAND

04/27/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: WEILAND, DOUGLAS J MD  
Address: 3281 LANDMARK DRIVE  
City-St-Zip: CLEARWATER, FL 33761 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: DOUGLAS J. WEILAND

MGR

04/27/2004

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