2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2004
Secretary of State

DOCUMENT# L03000043993

Entity Name: GENESIS, LLC

Current Principal Place of Business:

400 ORCHID SPRINGS DRIVE
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

C/O LORRAINE A. TRUPIANO
6039 CYPRESS GARDENS BLVD
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TURNER, MARK G
255 MAGNOLIA AVENUE, SOUTHWEST
WINTER HAVEN, FL 33880 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: MGR ( ) Delete
Name: TRUPIANO, LORRAINE A
Address: 400 ORCHID SPRINGS DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: MGR ( ) Delete
Name: KIER, HOLLEE A
Address: 400 ORCHID SPRINGS DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES:

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

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: LORRAINE TRUPIANO MGR 02/16/2004

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