

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000047056

FILED
Apr 02, 2004
Secretary of State

Entity Name: LANGHAM ENTERPRISES, LLC

Current Principal Place of Business:

1210 GENERAL POINTE TERRACE
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

1210 GENERAL POINTE TRACE
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

1210 GENERAL POINTE TERRACE
PALM BEACH GARDENS, FL 33418

New Mailing Address:

1210 GENERAL POINTE TRACE
PALM BEACH GARDENS, FL 33418

FEI Number: 58-2681376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SIEGEL, RONALD L
1800 CORPORATE BLVD., N.W.
SUITE 302
BOCA RATON, FL 33431 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: MGRM () Delete
Name: LANGHAM, ILENE
Address: 1210 GENERAL POINTE TERRACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LANGHAM, ILENE
Address: 1210 GENERAL POINTE TRACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: MGRM () Change (X) Addition
Name: OWEN, DOUGLAS
Address: 1210 GENERAL POINTE TRACE
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: ILENE LANGHAM

MGRM

04/02/2004

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