

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049547

FILED  
Apr 02, 2004  
Secretary of State

Entity Name: WULFRUNA AJ, LLC

## Current Principal Place of Business:

2121 MAIN STREET  
SUITE C  
SARASOTA, FL 34237 US

## New Principal Place of Business:

2200 EAST FOWLER AVENUE  
TAMPA, FL 33612 US

## Current Mailing Address:

2121 MAIN STREET  
SUITE C  
SARASOTA, FL 34237 US

## New Mailing Address:

2200 EAST FOWLER AVENUE  
TAMPA, FL 33612 US

FEI Number: 20-0643718

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ANTHONY OLSON, P.A.  
2121 MAIN STREET  
SUITE C  
SARASOTA, FL 34237 US

## Name and Address of New Registered Agent:

OLSON, ANTHONY E  
2121 MAIN STREET  
SUITE C  
SARASOTA, FL 34237 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: ANTHONY OLSON

04/02/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGRM ( ) Delete  
Name: HIGGINS, ANDREW  
Address: 8 ESPLANADE ROAD  
City-St-Zip: PAIGNTON, DEVON, DE TQ4 6EB UK

Title: MGRM ( ) Delete  
Name: HIGGINS, JULIE E  
Address: 8 ESPLANADE ROAD  
City-St-Zip: PAIGNTON, DEVON, DE TQ4 6EB UK

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: HIGGINS, ANDREW  
Address: 1804 FRENCH CREEK ROAD, APT #2  
City-St-Zip: TAMPA, FL 33613 US

Title: MGRM (X) Change ( ) Addition  
Name: HIGGINS, JULIE E  
Address: 1804 FRENCH CREEK ROAD, APT #2  
City-St-Zip: TAMPA, FL 33613 US

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: JULIE HIGGINS

MGRM

04/02/2004

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