

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055368

FILED  
Apr 21, 2004  
Secretary of State

**Entity Name:** STATEWIDE FINANCIAL OF SW FLORIDA, LLC

**Current Principal Place of Business:**

1007 SE 12TH CT. UNIT A  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1007 SE 12TH CT. UNIT A  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GABBETT, WAYNE G  
1007 SE 12TH CT. UNIT A  
CAPE CORAL, FL 33990

**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: PELLECHIO, SAMUEL A JR  
Address: 1007 SE 12TH CT. UNIT A  
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM ( ) Delete  
Name: BROLLINI, MARK  
Address: 1007 SE 12TH CT. UNIT A  
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM ( ) Delete  
Name: PELLECHIO, S. CHRISTOPHER  
Address: 1007 SE 12TH CT. UNIT A  
City-St-Zip: CAPE CORAL, FL 33990

Title: MGRM ( ) Delete  
Name: PELLECHIO, SAMUEL A SR  
Address: 1007 SE 12TH CT. UNIT A  
City-St-Zip: CAPE CORAL, FL 33990

**ADDITIONS/CHANGES:**

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

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

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: SAMUEL A. PELLECHIO, JR.

MGR

04/21/2004

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