

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90083 037 ****55.00

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L03000055819

1. Entity Name
ELY JR LLC



Principal Place of Business
8131 SAGURA ST
NAVARRE, FL 34566 US

Mailing Address
8131 SAGURA ST
NAVARRE, FL 32566 US

24061364



2. Principal Place of Business

8131 SEGURA ST

Suite, Apt. #, etc.

3. Mailing Address

8131 Segura St

Suite, Apt. #, etc.

04282004 Chg-LLC CR2E083 (10/03)

City & State

NAVARRE FL

City & State

NAVARRE FL

4. FEI Number

2407596402

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ELY, FRANCIS E JR
8131 SAGURA ST
NAVARRE, FL 32566

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

E. Ely Jr.

(NOTE: Registered Agent signature required when translating)

April 20, 2004

DATE

Filing Fee is \$50.00
Due by May 1, 2004

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ELY, FRANCIS E JR
STREET ADDRESS 8131 SAGURA ST
CITY- ST- ZIP NAVARRE, FL 32566 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

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CITY- ST- ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

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STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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

E. Ely Jr.

DATE

Daytime Phone #