

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000118108

FILED
Apr 30, 2009
Secretary of State

Entity Name: 1004 PARTNERS, LLC

Current Principal Place of Business:

1004 PINETREE DRIVE APT D
INDIAN HARBOUR BEACH, FL 32937

New Principal Place of Business:

Current Mailing Address:

1004 PINETREE DRIVE APT D
INDIAN HARBOUR BEACH, FL 32937

New Mailing Address:

FEI Number: 20-8152975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAGNUSSON, MARY-BETH
1004 PINETREE DRIVE APT D
INDIAN HARBOUR BEACH, FL 32937 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/MANAGERS:

Title: MGR () Delete
Name: MAGNUSSON, KYLE
Address: 14 NEWARK AVE
City-St-Zip: SPRING LAKE, NJ 07762

Title: MGR () Delete
Name: MAGNUSSON, TODD
Address: 1422 DAVIDSON AVE
City-St-Zip: BRICK, NJ 08724

Title: MGR () Delete
Name: MAGNUSSON, DEAN
Address: 711 TALL OAKS DRIVE
City-St-Zip: BRICK, NJ 08724

Title: MGR () Delete
Name: MAGNUSSON, GLENN
Address: 1570 LAUREL COURT
City-St-Zip: MANASQUAN, NJ 08736

Title: MGR () Delete
Name: MAGNUSSON, MARY BETH
Address: 1004 PINETREE DRIVE APT D
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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:

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARY-BETH MAGNUSSON

MGR

04/30/2009

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