

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000118108

Entity Name: 1004 PARTNERS, LLC

**FILED**  
**Feb 23, 2011**  
**Secretary of State**

**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  
Name: MAGNUSSON, KYLE  
Address: 14 NEWARK AVE  
City-St-Zip: SPRING LAKE, NJ 07762

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

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

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

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

I hereby 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

02/23/2011

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