

2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT

DOCUMENT # L96000001166

1. Entity Name  
QUEEN PARK INVESTMENTS, L.C.



Principal Place of Business  
605 MIRROR LAKES DR  
LEHIGH ACRES, FL 33936

Mailing Address  
605 MIRROR LAKES DR  
LEHIGH ACRES, FL 33936

**DO NOT WRITE IN THIS SPACE**



03242004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number  
59-3413040

Applied For  
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GORDON DUNCAN DUNCAN & TARDIF, P.A.  
1601 JACKSON STREET, SUITE 101  
FORT MYERS, FL 33901

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

1100000099025  
03/29/04-80067-005 50.00

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
BOOS, HANS  
605 MIRROR LAKES DR  
LEHIGH ACRES, FL 33936

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MEM  
BOOS, GISELA  
605 MIRROR LAKES DR  
LEHIGH ACRES, FL 33936

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

mgr.

3/24/04

Date

Daytime Phone #