


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 21, 2004 08:00 AM
Secretary of State

DOCUMENT # L97000000968 1. Entity Name DANIELS ROAD INVESTMENTS, L.L.C.	
--	---

Principal Place of Business 1833 HENDRY ST. FT. MYERS, FL 33901	Mailing Address 1833 HENDRY ST. FT. MYERS, FL 33901
---	---



07082004No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2471704	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

PAVESE, FRANK A
 1833 HENDRY ST.
 FT. 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: *Frank A. Pavese* DATE: 7/20/04

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by September 8, 2004

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM JOHN D. DESPREZ REVOCABLE TRUST P.O. BOX 9950 CANTON, OH 447110950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM CAROLINE H. DESPREZ REVOCABLE TRUST P.O. BOX 9950 CANTON, OH 447110950
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	

U00000187572
 07/21/04-80002-001 50.00

DO NOT WRITE 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: *Donald J. Dressler* DATE: 7/13/04 DAYTIME PHONE #: 330 489-5410

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

Donald J. Dressler