


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 15, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000000381 1. Entity Name A.L. PEPPER, LLC	
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Principal Place of Business 7225 ST. ANNS CT. FT. MYERS, FL 33908	Mailing Address 123 N. MAIN STREET DUBLIN, PA 18917
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DO NOT WRITE IN THIS SPACE



07122004 No Chg-LLC CR2E083 (10/03)

4. FEI Number 23-2955578	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

LOREN A. SCHULTZ
7225 ST. ANNS CT.
FT. MYERS, FL 33908

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

1100000166285
07/15/04-80002-016 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SCHULTZ, LOREN A 7225 ST. ANNS CT. FT. MYERS, FL 33908
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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

Date

Daytime Phone #

215-249-9401
7-12-04239 433 0917