

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 07, 2004 08:00 AM
Secretary of State

DOCUMENT # L98000000711

1. Entity Name

WRIGHT HOLDER WATTS, L.C.



Principal Place of Business

1230 FAIRVIEW LANE
RIVIERA BEACH, FL 33404

Mailing Address

540 POWDER SPRINGS ST., STE 27-E
MARIETTA, GA 30064



07012004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0844005

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIAMOND, LAWRENCE J
ACKERMAN, LINK & SARTORY PA
222 LAKEVIEW AVE., STE 1250
WEST PALM BEACH, FL 33401

**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 September 8, 2004

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME RJV CORP.
STREET ADDRESS 2300 PEACHTREE ROAD, SUITE 1127
CITY- ST- ZIP ATLANTA, GA 30338

TITLE MGRM
NAME HOLDER, DOUGLAS A JR.
STREET ADDRESS 8560 EGRET LAKES LANE
CITY- ST- ZIP WEST PALM BEACH, FL 33412

TITLE MGRM
NAME WATTS, LARRY V
STREET ADDRESS 540 POWDER SPRINGS ST., STE. 27-E
CITY- ST- ZIP MARIETTA, GA 30064

TITLE
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07/07/04-80017-013 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:

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

Date

Daytime Phone #

7-1-04 770-422-1308