

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002422

FILED
Jul 30, 2004
Secretary of State

Entity Name: OMEGA INVESTMENTS, L.C.

Current Principal Place of Business:

P.O. BOX 1585
BONITA SPRINGS, FL 34133

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1585
BONITA SPRINGS, FL 34133

New Mailing Address:

FEI Number: 65-0880684

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WOLFE, DAVID L ESQ.
28000 SPANISH WELLS BLVD., SUITE 220
NAPLES, FL 34135 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/MEMBERS:

Title: MGRM () Delete
Name: LEFFINGWELL, LARRY L
Address: P.O. BOX 1585
City-St-Zip: BONITA SPRINGS, FL 34133

Title: MGRM () Delete
Name: LEFFINGWELL, JANET M
Address: P.O. BOX 1585
City-St-Zip: BONITA SPRINGS, FL 34133

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: LARRY LEFFINGWELL

MGRM

07/30/2004

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