

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

07-28-2004 90100 009 ****50.00

L98000003131

DOCUMENT # L98000003131

1. Entity Name

BADEN INVESTMENT L.L.C.



Principal Place of Business

38820 TAYLOR RD
MYAKKA CITY FL 34251

Mailing Address

38820 TAYLOR RD
MYAKKA CITY FL 34251

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0880129

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BADEN, H. RAY—
301 99TH STREET NORTH WEST
BRADENTON FL 34209

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 8, 2004

9. MANAGING MEMBERS / MANAGERS

10. ADDITIONS / CHANGES

TITLE MGRM ☐ Delete
NAME BADEN, H. RAY
STREET ADDRESS 301 99TH STREET NORTH WEST
CITY-ST-ZIP BRADENTON FL 34209

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME BADEN, SARA B
STREET ADDRESS 301 99TH STREET NORTH WEST
CITY-ST-ZIP BRADENTON FL 34209

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *H. Ray Baden*
SIGNATURE AI

AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #