

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

99 SEP 28 PM 3:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee  
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

DOCUMENT # L98000003292

INVENTIVE SYSTEMS, L.L.C.  
4134 GULF OF MEXICO DRIVE  
LONGBOAT KEY FL 34228

1a. Principal Place of Business Address

4134 GULF OF MEXICO DRIVE  
LONGBOAT KEY FL 34228

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

12/21/1998

3a. State of Formation

FL

4. FEI Number

65-0913203

☐ Applied For

☐ Not Applicable

5. Date of Last Report

N/A

6. Certificate of Status Desired

SA (in Addition to Fee Reported) ☐

7. Name and Address of Current Registered Agent

MESSICK, ROBERT E  
2033 MAIN ST., SUITE 600  
SARASOTA FL 34237

8. Name and Address of New Registered Agent/Office

Name

FF \$188.75

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

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

DATE 4-15-99

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	VAN OVELEN, KURT	4134 GULF OF MEXICO DRIVE	LONGBOAT KEY FL
800003007608--S -10/06/99--01078--002 ****188.75 ****188.75			

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND LINED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #