

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005934

FILED  
May 01, 2004  
Secretary of State

Entity Name: THE DELPERKS COMPANY, LLC

## Current Principal Place of Business:

118 WEST ORANGE STREET  
ALTAMONTE SPRINGS, FL 32714

## New Principal Place of Business:

600 EAST COLONIAL DRIVE STE 200  
ORLANDO, FL 32803

## Current Mailing Address:

118 WEST ORANGE STREET  
ALTAMONTE SPRINGS, FL 32714

## New Mailing Address:

475 MONTGOMERY PLACE  
ALTAMONTE SPRINGS, FL 32714

FEI Number: 59-3604379

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GOLDBERG, RUSSELL  
118 WEST ORANGE STREET  
ALTAMONTE SPRINGS, FL 32714 US

## Name and Address of New Registered Agent:

KELLEY GOLDBERG LEACH AND COHN PL  
475 MONTGOMERY PLACE  
ALTAMONTE SPRINGS, FL 32714 US

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: RUSSELL GOLDBERG

05/01/2004

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: GOLDBERG, RUSSELL  
Address: 118 WEST ORANGE STREET  
City-St-Zip: ALTAMONTE SPRINGS, FL

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: GOLDBERG, RUSSELL  
Address: 475 MONTGOMERY PLACE  
City-St-Zip: ALTAMONTE SPRINGS, FL

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: RUSSELL GOLDBERG

MGR

05/01/2004

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