

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000007469

FILED  
Apr 02, 2004  
Secretary of State

Entity Name: ACRES & SON LEASING, LLC

## Current Principal Place of Business:

1911 SEWARD AVE., #3  
NAPLES, FL 34109

## New Principal Place of Business:

## Current Mailing Address:

1911 SEWARD AVE., #3  
NAPLES, FL 34109

## New Mailing Address:

FEI Number: 59-3608527

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

PAULICH, JOHN III  
801 ANCHOR RODE DRIVE  
SUITE 203  
NAPLES, FL 34103 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: ACRES, RANDY M  
Address: 425 15TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: MGRM ( ) Delete  
Name: ACRES, SANDRA E  
Address: 425 15TH AVE S  
City-St-Zip: NAPLES, FL 34102

Title: MGR ( ) Delete  
Name: ACRES, ROCHELLE  
Address: 3350 CROWN POINTE BLVD. N. #202  
City-St-Zip: NAPLES, FL 34112

Title: MGR ( ) Delete  
Name: ACRES-HATCH, RENE  
Address: 2461 DORSET COURT  
City-St-Zip: NAPLES, FL 34112

Title: MGR ( ) Delete  
Name: ACRES, RYAN  
Address: 2895 10TH ST. N.  
City-St-Zip: NAPLES, FL 34103

Title: MGR ( ) Delete  
Name: BOWLING, RONALD L  
Address: 6196 WOODSTONE DRIVE  
City-St-Zip: NAPLES, FL 34112

## ADDITIONS/CHANGES:

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

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

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

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

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: NANCY FARNSWORTH

MGR

04/02/2004

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

NANCY FARNSWORTH, MGR  
7818 EMERALD CIRCLE  
#202  
NAPLES, FL 34109