


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000001313 1. Entity Name MARLIN ESOURCING SOLUTIONS, LLC	
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Principal Place of Business 3600 COMMERCE BLVD KISSIMMEE, FL 34741	Mailing Address 3600 COMMERCE BLVD KISSIMMEE, FL 34741
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04132004No Chg-LLC CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 88-0435791	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**BAKER, RICHARD W
2535 SUCCESS DRIVE
ODESSA, FL 33556**

**DO NOT WRITE
IN THIS SPACE**

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

**Filing Fee is \$50.00
Due by May 1, 2004**

U00000152688
05/04/04-80096-003 350.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SPEER, ROY 2353 SUCCESS DRIVE ODESSA, FL 33556
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BAKER, RICHARD W 2353 SUCCESS DRIVE ODESSA, FL 33556
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BACHMAN, CELIA 3600 COMMERCE BLVD KISSIMMEE, FL 34741
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

11. I 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 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: 

CELIA H. BACHMAN

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/27/04

407-251-2020

Day

Daytime Phone #