


2004 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Feb 19, 2004 08:00 AM
Secretary of State

DOCUMENT # M01000002629 1. Entity Name R.A. SWARTZ TRANSPORT COMPANY, LLC																																															
Principal Place of Business 12309 HOUNDS BAY ROW HUDSON FL 34667			Mailing Address PO BOX 7228 HUDSON FL 34667																																												
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																												
City & State			City & State																																												
Zip	Country	Zip	Country	4. FEI Number 59-3749985 <div style="float: right; border: 1px solid black; padding: 2px;"> Applied For Not Applicable </div>																																											
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required																																											
6. Name and Address of Current Registered Agent SWARTZ, ROBERT A 12309 HOUNDS BAY ROW HUDSON FL 34667				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																															
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2004																																															
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left; padding: 5px;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="3" style="text-align: left; padding: 5px;">10. ADDITIONS/CHANGES</th> </tr> <tr> <td style="width: 15%; padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td style="width: 55%; padding: 5px;"> MGR SWARTZ, ROBERT A 12309 HOUNDS BAY ROW HUDSON FL 34667 </td> <td style="width: 10%; text-align: center; padding: 5px;"><input type="checkbox"/> Delete</td> <td style="width: 15%; padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td> <td colspan="2" style="width: 40%; padding: 5px;"> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> U00000057343 02/19/04-80057-016 50.00 </td> </tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td style="padding: 5px;"></td><td style="text-align: center; padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td colspan="2" style="padding: 5px;"> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> </td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td style="padding: 5px;"></td><td style="text-align: center; padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td colspan="2" style="padding: 5px;"> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> </td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td style="padding: 5px;"></td><td style="text-align: center; padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td colspan="2" style="padding: 5px;"> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> </td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td style="padding: 5px;"></td><td style="text-align: center; padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td colspan="2" style="padding: 5px;"> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> </td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td style="padding: 5px;"></td><td style="text-align: center; padding: 5px;"><input type="checkbox"/> Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY - ST - ZIP</td><td colspan="2" style="padding: 5px;"> <div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> </td></tr> </table>						9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES			TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SWARTZ, ROBERT A 12309 HOUNDS BAY ROW HUDSON FL 34667	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div> U00000057343 02/19/04-80057-016 50.00		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>		TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<div style="text-align: right;"> <input type="checkbox"/> Change <input type="checkbox"/> Addition </div>	
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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: <i>Robert A. Swartz</i> 2/16/04 727-862-3434																																															