

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000002667

FILED
Jul 06, 2004
Secretary of State

Entity Name: GARDELLA ENTERPRISES LLC

Current Principal Place of Business:

237 N. WILD OLIVE AVENUE
DAYTONA BEACH, FL 32118

New Principal Place of Business:

Current Mailing Address:

237 N. WILD OLIVE AVENUE
DAYTONA BEACH, FL 32118

New Mailing Address:

FEI Number: 82-0549426

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GARDELLA, JOHN R
175 SANFORD AVE
DEBARY, FL 32713 US

Name and Address of New Registered Agent:

GARDELLA, JOHN R
237 N. WILD OLIVE AVE
DAYTONA BEACH, FL 32118 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: JOHN R. GARDELLA

07/06/2004

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: GARDELLA, JOHN R
Address: 175 SANFORD AVE
City-St-Zip: DEBARY, FL 32713

Title: MGRM () Delete
Name: GARDELLA, JESSICA A
Address: 175 SANFORD AVE
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GARDELLA, JOHN R
Address: 237 N. WILD OLIVE AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: MGRM (X) Change () Addition
Name: GARDELLA, JESSICA A
Address: 237 N. WILD OLIVE AVE
City-St-Zip: DAYTONA BEACH, FL 32118

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: JOHN R. GARDELLA

MGRM

07/06/2004

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