

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2003 8:00 am
Secretary of State

07-25-2003 90065 002 ****50.00

002/281

DOCUMENT # L00000003857

1. Entity Name

STRATEGIC CAPITAL GROUP, LLC.



Principal Place of Business

11875 INDRIO ROAD
FT PIERCE FL 34951

Mailing Address

11875 INDRIO ROAD
FT PIERCE FL 34951

2. Principal Place of Business

11825 Indrio Road

3. Mailing Address

11825 Indrio Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

FT Pierce FL 34951

City & State

FT Pierce, FL

Zip

34951

Country

USA

Zip

34951

Country

USA

4. FEI Number

37-1442983

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BOURRET, RICHARD

7825 S.W. ELLIPSE WAY
STUART FL 34997

7. Name and Address of New Registered Agent

Name

JOE D. TIPPENS

Street Address (P.O. Box Number is Not Acceptable)

11825 INDRIO ROAD

City

FT PIERCE

FL

Zip Code

34951

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

Joe Tippens
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOURRET, RICHARD H 7825 SW ELLIPSE WAY STUART FL 34797	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TIPPENS, JOE D 11875 INDRIO ROAD FT. PIERCE FL 34957	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAST, GARY 2060-130 ADELAIDE ST. WEST TORONTO ONTARIO MSH 3P5	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	BOURRET, RICHARD H	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LAST, GARY 11825 INDRIO ROAD FT PIERCE, FL 34951	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

Joe Tippens
SIGNATURE REQUIRED

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

7/20/03
Date

772 370 3330
Daytime Phone #

CR2E083 (4/03)