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2001 UNIFORM BÜSINESS REPORT (U	
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ZUVI UNIFUNII BUSINESS REPUNI IU	un j

1. Entity Nan	MENT # L00000	007453	, 2°	01	FILI	ED am 10: 56	,		
Principal Place of Business 3020 HARTLEY ROAD, SUITE 300 JACKSONVILLE FL 32257 Mailing Address 3020 HARTLEY ROAD, SUITE 300 TALL					CRETARY OF STATE LAHASSEE, FLORIDA				
	•								
2. Principal F	. Mailing Address		=	-					
Suite, Apt.	#, etc.	uite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & Stat	te	City & State	ity & State		4. 5E Qumber 4.53555 Applied For Not Applied				
Zip	Country	Zip	ip Country		5. Certificat	e of Status Desired		5.00 Add ee Required	itional 1
	6. Name and Address of Current Reg	stered Agent		Name	7. Name an	d Address of New R	egistered A	gent	
	, MARK T RTLEY ROAD, SUITE 300	•		Street Address (P.O. Box Number is Not Acceptable)					
	WILLE FL 32257								
• .	· · · · · · · · ·	. 1.1	(City			FL	Zip Code	1
SIGNATURE	Signature, typed or printed name of registered agent and the	e il applicable. (NOTE: FILE-NO Make Check Pay	WIH=FE	· ·	-		DATE		
9.	MANAGING MEMBERS	MEMBERS	10.		L	ADDITIONS/	CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CONWAY, BARRY T. 3020 HARTLEY ROAD, JACKSONVILLE, FL 3		TITLE NAME STREET A CITY-ST-	1				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET A CITY-ST-	* *		100004 -06/19 *****	422 7010	□ Change □ □ 4 1073 *****	Addition :3 D24 50.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET AI	I	******			Change	Addition
11. I hereby of indicated	eritify that the information supplied with this on this report is true and accurate and that billity company or the receiver or trustee emp	my signature shall have th	he exempt le same leg	tion stated in Sec gal effect as if ma	ade under oat	n; that I am a managi	further certi ing member	fy that the int or manager	formation of the

SIGNATUR

Minarilah

Bernard E. Smith

April 19, 2001

(904) 260-3030
