2000 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam	ne	000001143		FILED	
MATTEAL	J, L.L.C.			00 JAN 18 PM 2:51	
Principal Place of Business 2286 BRUNER LANE FT. MYERS FL 33912		Mailing Address 2266 BRUNER LANE FT. MYERS FL 33912-1907		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
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2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & Stat	e	- City & State		4. FEI Number 65-0807773	Applied Fo
Zip	Country	Zip	Country	5. Certificate of Status Desired Fee Requ	Additional
	6. Name and Address of Curr	rent Registered Agent		7. Name and Address of New Registered Agent	
MATTEAU, ROGER			Name		
	INER LANE		Street Addres	s (P.O. Box Number is Not Acceptable)	
	S FL 33912				
			City	FL Zip C	Code
			1 ' '		
8. The above	named entity submits this statemen	nt for the purpose of changing it			
8. The above	named entity submits this statemen	nt for the purpose of changing it		tered agent, or both, in the State of Florida.	
8. The above	named entity submits this statement. Signature, typed or printed name of registered a	,		tered agent, or both, in the State of Florida.	
	Signature, typed or printed name of registered a	rigent and little if applicable. (NO FILE N Make Check P	ts registered office or regis OTE: Registered Agent signature requivalent NOW!!! FEE IS \$50.0 Payable to Department	ottered agent, or both, in the State of Florida. DATE DATE	
SIGNATURE	Signature, typed or printed name of registered a	ragent and little if applicable. (NO FILE N Make Check P	ts registered office or regis OTE: Registered Agent signature requivious PEE IS \$50.0 bayable to Department	ottered agent, or both, in the State of Florida. DATE O O O ADDITIONS/CHANGES	
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npany or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

13.2000

941 433 2449

Daytime Phone #