2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9800003055

1. Entity Name

NICKERSON BROTHERS, L.L.C.



FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90110 029 ****50.00

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Principal Place of Business Mailing Address					1					
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2. Principal P	Place of Business	3. Mailing Address								
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Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State			4. FEI Number 59-357167		70	Applied For Not Applicable		-
Zip	Country	Zip	Country		5. Certificat	e of Status Desired		5.00 Ad ee Require		
	6. Name and Address of	Current Registered Agent			7. Name an	d Address of New F	Registered A	gent]
NICI	KERSON, JOE D		<u> </u>	Name						
3206 STEVE ROBERTS SPEC ROAD ZOLFO SPRINGS FL 33890				Street Address (P.O. Box Number is Not Acceptable)]
		\		City			FL	Zip Coo	te	-
8. The above the obligati	ons of registered agent.	ment for the purpose of changing	its registered of	office or register	ed agent, or bo	oth, in the State of Flo	orida. 1 am fa	miliar with,	and accept	1
SIGNATURE	Signifure, typed or printed name of register	<u> </u>	OTE: Registered An	ent signature required	(when reinstation)		DATE			
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	•		ue By May		III OI State					
9. MANAGING MEMBERS/MANAGERS 11						ADDITIONS	/CHANGES			-
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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: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER MANAGER OR AUTHORIZED DEPOSSENT

2/7/03 (863)773-448