## 2000 UNIFORM BUSINESS REPORT (UBR)

	ONIFO	PHI DUSI	MESS NEP	UNI	(OB)	<u> </u>	AND	)		
DOCUMENT # L9900008255  1. Entity Name							FILED .			
GOLDENROD PIZZA LLC							00 MAY 23 AM 7: 56			
							SECRETARY OF STATE			
Principal Place of Business Mailing Address						<del></del>	TALLAHASSEE, FLORIDA			
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112 W. 50TH ST. 112 W. 50TH ST. 112 W. 50TH ST. HOLMES BEACH FL 34217 HOLMES BEACH FL 34217-1822										
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Suite, Apt. #, etc.  Suite, Apt. #, etc.							DO NOT WHITE	IN THIS SPACE.		
City & State City & State					_	4. FEIN		Ar	plied For	
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- 328		ountry 115A	32765	Cour	SA	<b>5.</b> Certif	ficate of Status Desired	S5.00 Add Fee Require		
		Address of Current R	egistered Agent		Ţ	7. Name	and Address of New Re	gistered Agent		
							R SCHERBE	R		
						Address (P.O. Box Number is Not Acceptable)				
112 W. 50TH ST. HOLMES BEACH FL 34217						200 0	150 Dan 1			
HOUMES !	DEAURI PL 342	l <i>t</i>				XX QUAL	KER RIDGE C	. Zin Cod		
					City C	VIEDO		FL 232	765	
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.  SIGNATURE Wardland School 4-26-00										
4-26-01									U	
SIGNATURE .	Signature, typed or of interest	led name of regletered agent an	ng)	DATE	_ <del></del>					
FILE NOW!!! FEE IS \$50.0						EN NO				
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CITY-ST-ZIP	artifu that the info	rmation ounnited with t	his filing does not qualify:			ted in Section 1197	77(3)(i) Florida Statutes Lf	urther certify that the i	ntormation	
1.1. 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 path; 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: CACALLY TO SEQUIRED 4-26-08										
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER							Date	Daytime Phone #		

**APPROVEU**