2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State
05-22-2002 90223 046 ****50.00

DOCUMENT # M00000000692

1. Entity Name
FREEDOM SCIENTIFIC BLV GROUP, LLC

Principal Place of Business	Mailing Address
2131 PALOMAR AIRPORT ROAD, SUITE 200 CARLSBAD CA 92009	2131 PALOMAR AIRPORT ROAD, SUITE 200 CARLSBAD CA 92009

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
11800 31st Court North	11800 31st Court North
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: St Petersburg, Fl 33709-1805	City & State: St Petersburg, Fl
Zip: 33709-1805 Country: Pinellas	Zip: 33709-1805 Country: Pinellas

4. FEI Number 33-0901333 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 ______________________________
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 Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	☐ Delete
NAME	CHANDLER, RICHARD H	
STREET ADDRESS	2131 PALOMAR AIRPORT ROAD, SUITE 200	
CITY-ST-ZIP	CARLSBAD CA 92009	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (9/01)

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: R.H. Chandler 5-1-02 760-602-5232
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #