2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010917

GALE & KITSON MANAGEMENT GROUP FREDON, LLC

	V						
Principal Place of Business	Mailing Address						
9055 IBIS BLVD. WEST PALM BEACH FL 33412	9055 IBIS BLVD. WEST PALM BEACH FL 33412						
2. Principal Place of Business	3. Mailing Address						
Suite, Apt. #, etc.	Suite, Apt. #, etc.						
City & State	City & State						
7:-							

FILED May 22, 2002 8:00 am secretary of State 05-22-2002 90273 037 ****50.00

WEST PALM BEACH FL 33412		WE	WEST PALM BEACH FL 33412										
			<u>.</u>					l	 	ERRI BANGU	IEN BENA INA		
2. Principal Place of Business 3. N			. Mailing Address										
Suite, Apt. #, etc.			s	Suite, Apt. #, etc.					DO NOT WRIT	E IN THIS S	SPACE		
City & State Ci			City & State			4. F	FLN	lumber			pplied For	7	
				<u> </u>	65-			1109212			lot Applicable	-	
Zip Country Zip			ip	Coun	5. C	5. Certificate of Status Desired \$5.00 Additional Fee Required					7		
	6Name	and Address of C	urrent Registe	ored Agent	E* -	, , , , , , , , , , , , , , , , , , ,	7. N	ame	and Address of New Re	gistered /	Agent -	ਮੁਸਦਾ ਮੁਸ	₫.
en:	EED OEODO	·c				Name							1
SPEER, GEORGE 9055 IBIS BLVD.			Street Ar			et Address (P.O. Box Number is Not Acceptable)							
		ACH FL 33412				 .	·		·				-
											17.0]
						City				FL	Zip Co	de 	
8. The above	e named entity	submits this stater	ment for the pu	rpose of changing its	registere	ed office or i	registered age	nt, c	or both, in the State of Flor	rida.			7
SIGNATURE						.~ .	•						
	Signature, typed o	r printed name of register	ed agent and title if a	applicable. (NOT!	: Registered	l Agent signatur	e required when rein	nstatir	ng)	DATE			
				FILE NO)	FEE IS \$5	50.00						1
				Make Check Pa				•					
<u> </u>					By Ma	ıy 1, 2002							
9.	<u></u>	MANAGING N	IEMBERS/MA		10.				ADDITIONS/0	CHANGES			_[
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	D Delete Speer, George G.				TITLE						Change	Addition	
	9055 Ib					T ADDRESS							
OUTS! OF THE	1	lm Beach.	FL 33412	2	CITY-	ST-ZIP							
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NAME STREET ADDRESS	!				NAME	T ADDRESS							1
CITY-ST-ZIP					CITY-	I							

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 trusted empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER

Speer

(561)630-7400