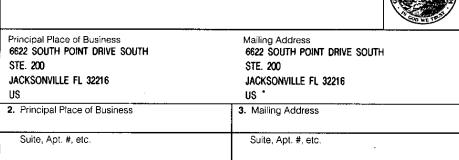
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DÖCUMENT#

F95000003996

1. Entity Name

PL FOOTWEAR, INC.





6622 SOUTH POINT DRIVE SOUTH STE. 200 JACKSONVILLE FL 32216 US 2. Principal Place of Business		6622 SOUTH POINT DRIVE SOUTH STE. 200 JACKSONVILLE FL 32216 US *						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. 1	5U=3323432		oplied For ot Applicable	
Zip	Country	Zip	Country	5. (Certificate of Status Desired	¢0.75	ditional	
	6. Name and Address of Current	Registered Agent		<u>7.</u>	Name and Address of New Regist	ered Agent		
LC FOOTWEAR, LLC 6622 SOUTHPOINT DR. SOUTH			Name Street Ad	Street Address (P.O. Box Number is Not Acceptable)				
SUITE #200 JACKSONVILLE FL 32216			City			FL Zip Cod	e	
	named entity submits this statement folions of registered agent. Signature, typed or printed name of registered agent		registered office or I			I am familiar with,	and accept	
After Make Check	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 k Payable to Florida Department o	State		4.0	9. Election Campaign Financin Trust Fund Contribution. In the contribution of the co	☐ Added	May Be i to Fees	
0.	OFFICERS AND		11.	AD	DITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 11	
ITLE IAME TREET ADDRESS ITY-ST-ZIP	CEOD WEAVER, J W 6622 SOUTH POINT DRIVE SOU JACKSONVILLE FL	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
ITLE AME TREET ADDRESS ITY-ST-ZIP	v Dade, Phillip 6622 South Point Drive Sou Jacksonville Fl	□ Delete TH, STE 200	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TLE	ST PRESCOTT, WILLIAM 6622 SOUTH POINT DRIVE SOU JACKSONVILLE FL	TH, STE. 200	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition	
TLE AME TREET ADDRESS ITY-ST-ZIP	V WEAVER, BRADLEY W 6622 SOUTH POINT DRIVE SOUT JACKSONVILLE FL	□ Delete TH, STE. 200	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TLE Ame Treet address Ty-ST-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TLE AME FREET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		,	Change	Addition	
2. Thereby c	tertify that the information supplied with on this report or supplemental report is	this filing does not qualify for	the exemption state	d in Section 1	19.07(3)(i), Florida Statutes. I furthe egal effect as if made under oath; the Statutes and the control of the statutes and the control of the statutes and the statutes are statutes as the statutes are statutes.	er certify that the in lat I am an officer	or director	

changed, or on an attachment with an address, with all other like empowered. 1-16-03 SIGNATURE: _

Daytime Phone #