

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# G85812

FILED
Apr 16, 2003
Secretary of State

Entity Name: LIEBIG INVESTMENTS, INC.

Current Principal Place of Business:

501 AIRPORT RD S.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

501 AIRPORT RD S.
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 59-2377795

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIEBIG, WOLFGANG T
501 AIRPORT ROAD, S.
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: KROUT, HAROLD E
Address: 521-31ST ST SW
City-St-Zip: NAPLES, FL 34117 US

Title: P () Delete
Name: LIEBIG, THOMAS,
Address: 254 GULF SHORE BL. S.
City-St-Zip: NAPLES, FL 34102 US

Title: T () Delete
Name: LIEBIG, WOLFGANG,
Address: 1111 GALLEON DR.
City-St-Zip: NAPLES, FL 34102 US

Title: V () Delete
Name: LIEBIG, GUNNAR,
Address: 254 GULF SHORE BL.,S.
City-St-Zip: NAPLES, FL 34102 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: KROUT, HAROLD E JR
Address: 521-31ST ST SW
City-St-Zip: NAPLES, FL 34117 US

Title: P (X) Change () Addition
Name: LIEBIG, THOMAS
Address: 254 GULF SHORE BL. S.
City-St-Zip: NAPLES, FL 34102 US

Title: T (X) Change () Addition
Name: LIEBIG, WOLFGANG
Address: 1111 GALLEON DR.
City-St-Zip: NAPLES, FL 34102 US

Title: V (X) Change () Addition
Name: LIEBIG, GUNNAR
Address: 254 GULF SHORE BL.,S.
City-St-Zip: NAPLES, FL 34102 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HAROLD E. KROUT JR

S

04/16/2003

Electronic Signature of Signing Officer or Director

Date