2003 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2003
Secretary of State

DOCUMENT# L00000000570

Entity Name: SPLIT COVERS LLC

Current Principal Place of Business:

540 PALMETTO RD.
BELLEAIR, FL 33756

New Principal Place of Business:

509 SAND CRANE CT.
BRADENTON, FL 34212

Current Mailing Address:

540 PALMETTO RD.
BELLEAIR, FL 33756

New Mailing Address:

509 SAND CRANE CT.
BRADENTON, FL 34212

FEI Number: 59-3617741 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LIMARDI, HENRY F
540 PALMETTO RD.
BELLEAIR, FL 33756 US

Name and Address of New Registered Agent:

LIMARDI, HENRY F
509 SAND CRANE CT.
BRADENTON, FL 34212 US

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: HENRY F. LIMARDI 05/16/2003
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: LIMARDI, HENRY F MGR
Address: 540 PALMETTO RD.
City-St-Zip: BELLEAIR, FL 33756

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LIMARDI, HENRY F MGR
Address: 509 SAND CRANE CT.
City-St-Zip: BRADENTON, FL 34212

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 is true and accurate and that my electronic 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: HENRY F. LIMARDI PRES 05/16/2003
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date