2001 UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam	MENT # L0000 TED FOREST, L.L.C.	0000879			<u></u>		FII	LED	
Principal Plac	e of Business			1	2001 1	AY I	D PM 2	: 31	
Principal Place of Business Mailing Address 10741 SKYHAWK DRIVE 10741 SKYHAWK D					1		1		_
	CHEY FL 34854	NEWPORT RICHEY FL 34654			}	טוני(עוט לאנז	N UF (ORPORA SEE, FLO	TIONS
					1		AHAS)	
<u> </u>	lace of Business	3. Mailing Address]. '	1990)90) 80) 980)) 98 0)) 980) 980)		ALIA ARIRA (ALIA II	18(0 13 19 184).
Suite, Apt.		Suite, Apt. #, etc. City & State			DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For				
	· 				5	7-362/13		No	t Applicable
Zip Country		Zip Count		itry	5. Certif	icate of Status Desired		\$5.00 Add Fee Required	
	6. Name and Address of Current	Registered Agent		Nama	7. Name	and Address of New Reg	istered /	Agent	
BYBEE, M	Name			1					
10741 SKYHAWK DRIVE				Street Address	(P.O. Box N	umber is Not Acceptable)	1		
NEWPORT RICHEY FL 34654				 			1		
			<u></u>	City	·		FL	Zip Code)
8. The above	named entity submits this state ment in	the purpose of changing it	s registere	ed office or registe	red agent, o				
SIGNATURE .	d Agent signature require	d uhan sainstati	5-1	DATE					
	Signatura, typed or sented name of registered agent of			 	O WHOM TOURSEALL	 	i DATE		
	· ·			FEE IS \$50.00 o Department c	of State				1
9.	MANAGING MEMBE	RS/MEMBERS	10.			ADDITIONS/C	HANGES		
TITLE	MARK T Bybee	Delete	TITL	- 1				Change	Addition
NAME STREET ADDRESS	10741 Shyhank DR NEW PONT RICHEY FZ	•	NAM STRE	ET ADDRESS					
CITY-ST-ZIP	NEW PORT RICHEY FL	34654		-ST-ZIP +					
TITLE		☐ Delete	TITL	{				☐ Change	☐ Addition
NAME STREET ADDRESS			NAM	E ET ADDRESS		50000043	312.5 112.5		1 016
CITY-ST-ZIP	<u> </u>	<u>-</u>		-ST-ZIP		- *****S	ă.œ	****	50.00
TITLE		☐ Delete	TITL	{				☐ Change	Addition
NAME STREET ADDRESS			NAM Stre	ET ADDRESS					
CITY-ST-ZIP			•	-S7-ZIP					-
TITLE)	☐ Delete	TITLE					☐ Change	Addition
NAME STREET ADDRESS			NAM	ET ADDRESS					
CITY-ST-ZIP				-ST-ZIP			•		
TITLE		☐ Delete	TITLE	1	···			☐ Change	☐ Addition
NAME STREET ADDRESS			NAM! STRE	E Et address				,	Ì
CITY-ST-ZIP			CITY	-ST-ZIP			<i>3</i>		
TITLE ?		☐ Delete	TITLE	i				☐ Change	Addition
NAME STREET ADDRESS			NAM! STRF	ET ADDRESS			らし		}
CITY-ST-ZIP				-ST-ZIP			<i>F</i> . "		}
indicated	ertify that the information supplied with on this report is true and accurate and offity company or the receiver or trustee	inat my signature shall have	the same	e legal effect as if n	nade under	oath; that I am a managing rida Statutes.	membe	r or manager	r of the
SIGNAT	URE:	BPZZEOU		MKT BY		5-1-01			1-1958
	SIGNATURE AND TYPED OF PRINTED NAME OF	signing Kanag ing Member, M	ANAGER, OR	AUTHORIZED REPRESE	NTATIVE	Date	. D:	aytime Phone #	-