## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L0000001413

SIGNATURE



05-02-2003 90265 040 \*\*\*\*50.00 1. Entity Name VECTOR II. L.C. Principal Place of Business Mailing Address 6321 BALBOA LANE P.O. BOX 3521 APOLLO BEACH FL 33570 APOLLO BEACH FL 33572-1005 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-3669622 Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KNIGHT, RONALD A .. Street Address (P.O. Box Number is Not Acceptable) 6321 BALBOA LANE APOLLO BEACH FL 33570 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES MGRM TITLE ☐ Delete TITLE Change ☐ Addition KNIGHT, RONALD A NAME NAME STREET ADDRESS 12902 US HWY 301 SOUTH SUITE B STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP RIVERVIEW FL 33569 Change TITLE Delete TIT! F ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not quarry 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 mysignature 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.

May 02, 2003 8:00 am Secretary of State