2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR

Mailing Address

4665 US 27 SOUTH

3. Mailing Address

City & State

Suite, Apt. #, etc.

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DOCUMENT # L0000001759

Country

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

MANAGING MEMBERS/MANAGERS

1. Entity Name

4665 US 27 SOUTH SEBRING FL 33870-5527

Principal Place of Business

2. Principal Place of Business

TUBBS, MIKE 4665 US 27 SOUTH

SEBRING FL 33870-5527

the obligations of registered agent.

GEORGE, LINDA T

4665 US 27 SOUTH

TUBBS, MICHAEL L

4665 US 27_SOUTH

TUBBS, RAYMOND A

4665 US 27 SOUTH

SEBRING FL 33870-5527

SEBRING FL 33870-5527

SEBRING FL 33870-5527

Suite, Apt. #, etc.

City & State

Zio

SIGNATURE

9.

TITLE

NAME

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NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

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CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

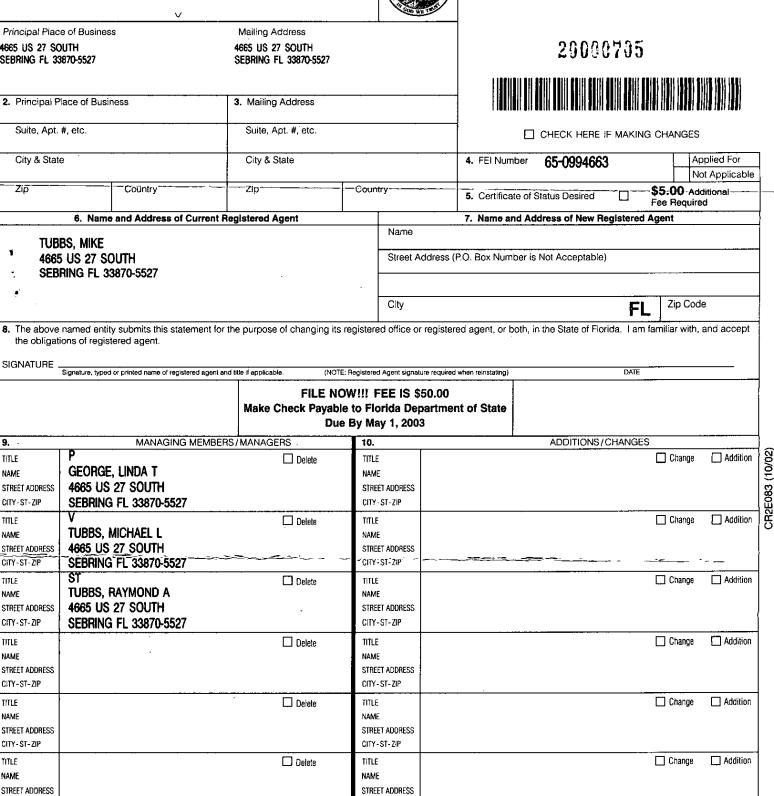
CITY-ST-ZIP

LRM, LC



FILED Jan 08, 2003 8:00 am Secretary of State

01-08-2003 90122 014 ****50.00



11. I hereby certify that the information supplied with this filing does not qualify 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 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 repeting or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED