2001 UNIFORM BUSINESS REPORT (UBR)

STAPLE CHECK MERE

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THE BECKNER LLC									F** 1.1				
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Principal Place of Business Mailing Address						01 JUL 12, AN 8:47					3: 47		
2105 DESOTO WAY SOUTH				2105 DESOTO WAY SOUTH				SECRETARY OF STATE					
ST PETERSBURG FL 33712-4110			51	ST PETERSBURG FL 33712-4110				TALLAHASSEE, FLORIDA					
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2. Principal Place of Business			3. M	3. Mailing Address) – I CERTATU BU OENK BOUK BOUK BOUK BOUK BOUK BOUK BOUK BUKE KIRBO KUKE 1014 KOUK					
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Zip		Country	Zi	p	Count	try				i	7 No	ot Applicable	
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	o. Name	and Address of Current	Hegiste	red Agent		Name	7. Name	and Addres	s of New R	egistered /	Agent		
BECKNER, MARY B						Street Address	(P.O. Box N	lumber is Not	Acceptable)			
2105 DESOTO WAY SOUTH ST PETERSBURG FL 33712-4110										*			
						City				FL	Zip Cod	e ' '	
8. The above	named entity	submits this statement fo	or the nui	rnose of changing its re	enistere	ed office or register	red agent	or both in the	State of Flo			+	
			, the par	·	ogiotore	or register	rod agent,	or boin, ar the	State of 1 to	ijua.			
SIGNATURE .	Signature, typed	or printed name of registered agent											
		a printed rialite of registered agent	and title if a	pplicable. (NOTE:	Registered	d Agent signature required	d when reinstati			DATE			
		or printed halle or registered agent	and title if a	· · · · · · · · · · · · · · · · · · ·		Agent signature required	d when reinstati	:300	504 -	133 :	968-		
		a primited marrie of registrated agents	and title if a	FILE NO	W!!! F	EE IS \$50.00		:300) () -4 - -07/18/ *****\$	483 : (010	9 68- 1023(*****		
9.		MANAGING MEMBE		FILE NO Make Check Pay Due By S	W!!! F	EE IS \$50.00 Department o		800 (-07/18/	433 : /010 :0.00	10230		
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Dayline Pho