1/3:

FILED Apr 11, 2002 8:00 am Secretary of State

2002 UNIFORM BUSINESS REPORT (UBR)

DOGUMENT # L0000002727						01-31-2002 90082 011 ****50.00					
1. Entity Nam	™ OW, PEARCE & KNIGHT PROI										
		1-									
Principal Place of Business Mailing Address											
1023 SOUTH FLORIDA AVE.		1023 SOUTH FLORIDA AVE.									
i lakeland fi	. 33903	LAKELAND FL 33903				-					
2. Principal Place of Business		3. Mailing Address					IAND ARE LONG FROM		SO TOTAL COMP		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE					
City & State		City & State				4. FEI Number Applied For Sq - 3(0.3:5/0.09 Not Applicable					
Zip	Country	Zip Coun		Ŋ	5. Certificate of Status Desi			\$5.00 Additional			
	6. Name and Address of Current R	egistered Agent			7. _. N	lame and Ad	dross of New Re				<u> </u>
water and the same of the same								در سهاي	÷		7
PEARCE, DAVID C 1023 SOUTH FLORIDA AVE.				Street /	Address (P.O. Ba	(P.O. Box Number is Not Acceptable)					1
LAKELAND FL 33803											
				City				FL Zip Code			7
a. The above	named entity submits this statement for	the purpose of changing its	ragistare	o office o	or registered age	ent, or both, in	the State of Flori	de.	<u> </u>	***	┪
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SIGNATURE					Ne requied when rei	netitiong),		DATE		 _	1
FILE NOV				EE IS	\$50.00						7
Make Check Payabl Due By				-		B					
	MANAGING MEMBER		1 10.	y 1, 200)4 }		ADDITIONS/C	- ALIGER		<u></u>	4
IITLE	MGR MEMBER	Delete	TITLE		mek	2			Change	Addition	18
NAME	PEARCE, DAVID C		NAME		Pearce,	unio i	ins				9
STREET ADDRESS CITY-ST-ZP	417 SOUTH FLORIDA AVENUE LAKELAND FL 33803		CITY-S	TADDRESS T-ZIP	La KA la	nd, Fil.	chy 33803				CP2E083 (9/01)
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NAME .			NAME	ADDRESS	,	:					
STREET ADDRESS CITY-ST-ZIP	•		CIFY-SI	- 1							1
11. Thereby c	ertily that the information supplied with th	is filing does not qualify for t	he examp	otion stat	ed in Section 11	9.07(3)(i), Flo	rida Statutes. I fu	ther certify	that the in	ormation	<u> </u>
indicated	or this report is true and accurate and the	at my signature shall have th	ne same k	egal elle	ct as if made un	deroath; that	lam a managing	member o	10gansm K	of the	1
			1		211	2/00				!	
	" " 4/3/02 " "										

DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE ATLANTA GA 39901 DATE OF THIS NOTICE: 04-07-2000 NUMBER OF THIS NOTICE: CP 575 B EMPLOYER IDENTIFICATION NUMBER: 59

59-3635609

FORM: SS-4 0716927265 B

H L 0000000000

FOR ASSISTANCE CALL US AT: 1-800-829-1040

WINSLOW PEARCE & KNIGHT PROPERTIES L L C 1023 S FLORIDA AVE LAKELAND FL 33803

OR WRITE TO THE ADDRESS SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 59-3635609. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records:

Use your complete name and EIN as shown above on all federal tax forms, payments, and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing, incorrect information in your account, or cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following form(s) by the date we show.

Form 1065

04/15/2001

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.