2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2001 08:00 AM
Secretary of State

DOCUMENT # **L00000005118**

1. Entity Name
FOUR BROKERS, LLC

Principal Place of Business	Mailing Address
1909-3 CAPITAL CIRCLE, N.E.	1909-3 CAPITAL CIRCLE, N.E.
TALLAHASSEE FL 32308	TALLAHASSEE FL 32308

2. Principal Place of Business	3. Mailing Address
1909 CAPITAL CIRCLE, N.E.	1909 CAPITAL CIRCLE, N.E.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: TALLAHASSEE FL	City & State: TALLAHASSEE FL
Zip: 32308 Country:	Zip: 32308 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number — [X] Applied For — [ ] Not Applicable

5. Certificate of Status Desired [ ] **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CARRUTHERS MICHAEL D
1909-3 CAPITAL CIRCLE, N.E.
TALLAHASSEE FL
32308

7. Name and Address of New Registered Agent

Name: CARRUTHERS MICHAEL D
Street Address (P.O. Box Number is Not Acceptable): 1909 CAPITAL CIRCLE, N.E.
City: TALLAHASSEE **FL** Zip Code: 32308

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.

SIGNATURE ______________________ 04/30/2001
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 Department of State

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARRUTHERS MICHAEL D 1909-3 CAPITAL CIRCLE, N.E. TALLAHASSEE FL 32308	[ ] Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CARRUTHERS MICHAEL D 1909 CAPITAL CIRCLE, N.E. TALLAHASSEE FL 32308	[X] Change [ ] Addition
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CR2E083 (11/00)

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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Michael D. Carruthers MGRM 04/30/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #