

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

01-28-2002 90005 010 ****50.00

DOCUMENT # L00000005430

1. Entity Name
MORNINGSTAR HOLDINGS, LLC

Principal Place of Business Mailing Address
7315 HUDSON AVENUE 7315 HUDSON AVENUE
HUDSON FL 34667 HUDSON FL 34667



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

4. FEI Number **APPLIED FOR** Applied For
59-3730102 Not Applicable

Zip Country Zip Country 5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ZSCHAU, JULIUS J
911 CHESTNUT STREET
CLEARWATER FL 38457 33756

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** 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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

| 9. MANAGING MEMBERS/MANAGERS | | 10. ADDITIONS/CHANGES | |
|------------------------------|--|---------------------------------|---|
| TITLE | NAME | TITLE | NAME |
| | MGR BONATI, ALFRED O 7315 HUDSON AVENUE HUDSON FL 34667 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | M BONATI, ALFRED O 7315 HUDSON AVENUE HUDSON FL 34667 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| | M BONATI, PATRICIA 7315 HUDSON AVENUE HUDSON FL 34667 | <input type="checkbox"/> Delete | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Alfred O. Bonati* **Alfred O. Bonati, M.D. Mgr.** Date: 1-21-02 Daytime Phone #: 727-868-9563

CR2E083 (9/01)