

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L000000005051

**FILED**

01 JUN 25 AM 8:47

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Entity Name  
**TATERS & H LLC**

Principal Place of Business Mailing Address  
**204 THIRD ST. WEST #308 204 3RD ST. W**  
**BRADENTON, FL 34205 UNIT 308**  
**6206 U.S. Hwy 301 N BRADENTON FL**  
**ELLENTON FL 34222 34205**

2. Principal Place of Business **SAME**  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

4. FEI Number **65-1007889** Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**DONALD HALLER**  
**204 THIRD ST. WEST 308**  
**BRADENTON, FL 34205**

7. Name and Address of New Registered Agent  
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 Donald Haller DATE 6-21-01  
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**

**700004463237-3**  
**-07/09/01--01007--006**  
**\*\*\*\*\*50.00 \*\*\*\*\*50.00**

9. MANAGING MEMBERS/MANAGERS  
TITLE **MEMBER** ☐ Delete  
NAME **DONALD HALLER**  
STREET ADDRESS **204 THIRD ST. WEST 308**  
CITY - ST - ZIP **BRADENTON, FL 34205**

10. ADDITIONS/CHANGES  
TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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: Donald Haller **DONALD HALLER** 6-12-01  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)