941-964-0115

02

## 2002 UNIFORM BUSINESS REPORT (UBR)

**SIGNATURE:** 

2002 UNIFORM BUSINESS REPORT (UBR)  DOCUMENT # L0000005846  1. Entity Name							FILED Feb 18, 2002 8:00 am Secretary of State 01-15-2002 90034 008 ****50.00					
Principal Place of Business PO BOX 812 BOCA GRANDE FL 33921		Mailing Address PO BOX 812 BOCA GRANDE FL 33921			in I		- 13279					
2. Principal Place of Business		3. Mailing Address										
Suite, Apt. #, etc.		Suite, Apt. #, etc.					Đ	NOT WRITE!	IN THIS !	SPACE		
City & State		City & State					Number 65	5-10191		No	plied For t Applicable	
Zip	Country	Zi	ip 	Cour	ntry	5. Cer	tificate of Statu	s Desired		\$5.00 Add Fee Required		
	6. Name and Address of Current	Registe	ered Agent	<del></del>	Name ·	7. Nan	ne and Addres	s of New Reg	Istered /	Agent		┨-
184	IGHAM, DAVID L ESQ. 01 MURDOCK CIRCLE			*	-Street Addre	ess (P.O. Box	Number is Not	Acceptāble)		_^		
POF	RT CHARLOTTE FL 33948				City		•	*	FL	Zip Code	9	
8. The above	named entity submits this statement fo	r the pu	rpose of changing its	register	ed.office or reg	istered agent	, or both, in the	State of Florid		<u>· l</u>		
SIGNATURE .					*******				DATE	<del></del>	<del></del>	
<del></del>	Signature, typed or printed name of registered agent	and the a			FEE IS \$50.		1	<u></u>	- LANE	<del></del>	<u>.</u>	
			Make Check Pa	yable t								
9.	MANAGING MEMBE	RS/MA		10.	<del></del>		. А	DDITIONS/CH	IANGES	☐ Change	☐ Addition	Ē
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SEIDENSTICKER, PATRICIA 421 PARK AVE. BOCA RATON FL 33921-0812		Delete									CR2E083 (9/01)
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TITLE NAME STREET ADDRESS			Delete -		1		~	· • • • • • • • • • • • • • • • • • • •		☐ Change	☐ Addition	
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TITLE		··	☐ Delete	חזנו			<del></del>		_	☐ Change	Addition	;
NAME STREET ADDRESS CITY-ST-ZIP	r		, ,	STRE	EET ADDRESS '-ST-ZIP					ung te sa	2	
	certify that the information supplied with on this report is true and accurate and bility company or the receiver or truster							a Statutes. I fur m a managing	ther cen	ify that the in or manage	formation r of the	-

OF SIGNANG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE