2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L0000006105

Entity Name: THE TRADING GROUP LLC

FILED Apr 09, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7350 SE 193RD AVENUE 7350 S.E. 193 AVENUE MORRISTON, FL 32668 MORRISTON, FL 32668 **Current Mailing Address: New Mailing Address:** 7350 SE 193RD AVENUE 7350 S.E. 193 AVENUE MORRISTON, FL 32668 MORRISTON, FL 32668 FEI Number: 12-9188365 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DUKE, DOLORES DOLORES, P D UKE 7350 SE 193RD AVENUE 7350 S.E. 193 AVENUE MORRISTON, FL 32668 MORRISTON, FL 32668 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: DOLORES P DUKE 04/09/2003 Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGR () Delete (X) Change () Addition DUKE, DOLORES P PRES DOLORES, P D UKE Name: Name: 7350 S.E. 193 AVENUE Address: 7350 S.E. 193 AVENUE Address: City-St-Zip: MORRISTON, FL 32668 City-St-Zip: MORRISTON, FL 32668 Title: Title: MGR () Change (X) Addition () Delete Name: DOLORES, P D UKE Name: Address: Address: 7350 S. E. 193 AVENUE City-St-Zip: City-St-Zip: MORRISTON, FL 32668 Title: () Delete Title: MGR () Change (X) Addition DOLORES, P D UKE Name: Name: 7350 S.E. 193 AVENUE Address: Address: City-St-Zip: City-St-Zip: MORRISTON, FL 32668 Title: () Delete Title: MGR () Change (X) Addition Name: Name: DOLORES, P D UKE Address: Address: 7350 S.E. 193 AVENUE City-St-Zip: City-St-Zip: MORRISTON, FL 32668 Title: () Delete Title: MGR () Change (X) Addition DOLORES, P D UKE Name: Name: 7350 S.E. 193 AVENUE Address: Address: City-St-Zip: City-St-Zip: MORRISTON, FL 32668 Title: () Delete Title: () Change (X) Addition DOLORES, P D UKE Name: Name: Address: Address: 7350 S.E. 193 AVENUE MORRISTON, FL 32668 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: DOLORES P DUKE MGR 04/09/2003