2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000007458

1. Entity Name

THE GUN SEARCH-COM, LLC



Principal Place of Business Mailing Address 8208 CORTEZ RD W 8208 CORTEZ RD W 20006477 STF 6 STE 6 **BRADENTON FL 34210 BRADENTON FL 34210** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 65-1021820 Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent NAPOLITANO & COOPER, P.A. 100 WALLACE AVENUE Street Address (P.O. Box Number is Not Acceptable) **STE 240** SARASOTA FL 34237 City 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES TITLE

FILED Jan 14, 2003 8:00 am Secretary of State

01-14-2003 90036 024 ****55.00

| NAME STREET ADDRESS CITY-ST-ZIP | BIGELOW, DONALD E 1130 MONTEZUMA DRIVE BRADENTON FL 34209 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM | ⊠ Change | ☐ Addition | 5083 (10/02) |
|---------------------------------------|---|----------|---------------------------------------|------|-----------------|------------|--------------|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BIGELOW, ANDREW E 8008 22ND AVE W BRADENTON FL 34209 | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM | ⊠ Change | Addition | CR2E083 |
| NAME STREET ADDRESS CITY-ST-ZIP | | □ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Change | Addition | • |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | | Change | ☐ Addition | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | ☐ Delete | TITLE NAME STREET ADDRESS | | Change | Addition | |

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.

JIFDONALD E. BIGELOW 1-7-03 941-761-4985

MANAGER OR AITHORITED REPRESENTATIVE Date Daytime Phone #