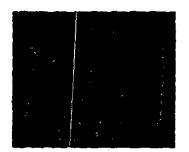
1/1

Feb 25, 2002 8:00 am

2002 UNIFORM BUSINESS REPORT (UBR)

Secretary of State DOCUMENT # ,L0000008049 01-16-2002 90257 030 ****50.00 FLP PROPERTIES, LLC Mailing Address ... Principal Place of Business 6500 HOFFNER AVE. 6500 HOFFNER AVE. ORLANDO FL 32822 ORLANDO FL 32822 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Applied For City & State Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent W.D. MILLSAPS, SR. Street Address (P.O. Box Number is Not Acceptable) 6500 HOFFNER AVE. ORLANDO FL 32822 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. (NOTE: Registered Agent algosture required when re-FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. 9/01 TITE F ☐ Addition TITLE ☐ Delete Change NAME MILLSAPS, WILLIAM DAVID NAME STREET ADDRESS 6500 HOFFNER AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32822 SEC ☐ Addition TITLE TILE ☐ Delete ☐ Chance MILLSAPS, COLLEEN NAME: NAME STREET ADDRESS 1766 GAINEY ROAD STREET ADDRESS CITY-ST-ZIP **CAIRO GA 31728** CITY-ST-ZIP TITI F Delete TITL F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Addition TITLE Change □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP T/T/F ☐ Delete ☐ Addition ☐ Chance NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE Addition Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Ignature shall have the same legal effect as if made under oath; that I am a managing member or manager of the red to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE:



Internal Revenue Service

HL 60000008049 Accounts Management Division I Branch II - Teletin Unit

Stop 751 PO Box 47421 Chembles, GA 30362 Phone 878-530-7234/7235 FAX 678-530-6156

Date: October 26, 2001

EMPLOYEE IDENTIFICATION: U71683048)

-TO:	WILLIAM DAVID MILLSAPS	PAX:	407-208-9539
FROM:	Accounts Management Division I Teletin Unit	Pages:	1
Company Name	FLP PROPERTIES LLC	Employer ID #	59-3751805
Company Name		Employer ID#	
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	
Company Name		Employer ID #	

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