2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

Mailing Address

6500 HOFFNER AVE.

ORLANDO FL 32822

3. Mailing Address

City & State

Suite, Apt. #, etc.

DOCUMENT # L0000008049

1. Entity Name

FLP PROPERTIES, LLC

Principal Place of Business

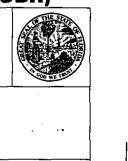
2. Principal Place of Business

Suite, Apt. #, etc.

City & State

6500 HOFFNER AVE.

ORLANDO FL 32822



FILED Jan 27, 2003 8:00 am Secretary of State

01-27-2003 90078 033 ***150.00

20018116



W.D. MILLSAPS, SR. 6500 HOFFNER AVE. ORLANDO FL 32822

Country

7. Name and Address of New Registe	erød Ag	ent	
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. I am familiar with, and accept the obligations of registered agent.

Country

Signature, typed or printed name of registered agent and title if applicable.

8 Name and Address of Current Registered Agent

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003

9.	MANAGING MEMBERS	/MANAGERS	10.	ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO MILLSAPS, WILLIAM DAVID 6500 HOFFNER AVE. ORLANDO FL 32822	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	Addition
TITLE NAME STREET ADDRESS — CITY-ST-ZIP	SEC MILLSAPS, COLLEEN 1766 GAINEY ROAD -CAIRO:GA:31728	☐ 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 ADORESS CITY-ST-ZIP	change Change	Addition

I nereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07 (37), Florida statutes. This 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 leavecute this report as required by Chapter 608, Florida Statutes.