

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90225 009 ****55.00

DOCUMENT # L00000009119

1. Entity Name
QUALSTRAT, L.L.C.

Principal Place of Business
**812 WILLOWBRANCH AVENUE
 CLEARWATER FL 33764**

Mailing Address
**812 WILLOWBRANCH AVENUE
 CLEARWATER FL 33764**

2. Principal Place of Business
812 WILLOWBRANCH AVENUE
 Suite, Apt. #, etc.

3. Mailing Address
812 WILLOWBRANCH AVENUE
 Suite, Apt. #, etc.

City & State
CLEARWATER, FL
 Zip
33764
 Country
PINELLAS

City & State
CLEARWATER, FL
 Zip
33764
 Country
USA

4. FEI Number **59-3661322**
 Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **\$5.00 Additional Fee Required**

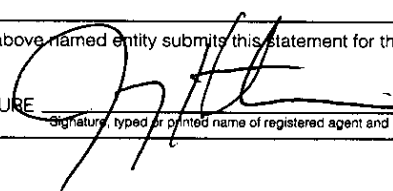
6. Name and Address of Current Registered Agent

**GASSMAN, ALAN S
 1245 COURT STREET, SUITE 102
 CLEARWATER FL 33756**

7. Name and Address of New Registered Agent

Name **JERRY W. HARTMAN**
 Street Address (P.O. Box Number is Not Acceptable)
812 WILLOWBRANCH AVENUE
 City **CLEARWATER** FL Zip Code **33764**

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.

SIGNATURE  **JERRY W. HARTMAN, MANAGER** **1-5-02**
 (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FERRETTI, THOMAS ALAN JR. 730 ORANGEVIEW DRIVE LARGO FL 33778	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LEFEBVRE, JAMES E 7335 MAYFIELD DRIVE PORT RICHEY FL 34668	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HEIM, DAVID M 108 JASMINE CIRCLE SAFETY HARBOR FL 34695	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR COMBS, LESLIE W 14304 GRAFTON PLACE TAMPA FL 33625	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VAUGHT, GLENN D 7501 ULMERTON ROAD #822 LARGO FL 33771	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HARTMAN, JERRY W 812 WILLOWBRANCH AVENUE CLEARWATER FL 33764	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGER JOHN DENIS WILSON 9910 GREEN IVY DRIVE TRINITY, FL 34655	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE  **JERRY W. HARTMAN, MANAGER** **1-5-02**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)

727-443-2656