

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000010388

1. Entity Name
VENTRY COMPANY, LLC

FILED

01 APR 30 PM 5:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0024909 AF

Principal Place of Business
216 NORTH ADAMS STREET
QUINCY FL 32351

Mailing Address
216 NORTH ADAMS STREET
QUINCY FL 32351



DO NOT WRITE IN THIS SPACE

MJH

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3708352**

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GEEKER, VAN P
1322 THOMASWOOD DRIVE
TALLAHASSEE FL 32312

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.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE NAME Delete
MGR VENTRY, WILLIAM F
STREET ADDRESS **216 NORTH ADAMS STREET**
CITY-ST-ZIP **QUINCY FL 32351**

TITLE NAME Change Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME Delete
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
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 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 *Frank Ventry*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date **4/27/01** Daytime Phone # **850 627 3900**

CR2E083 (11/00)