

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90019 019 ****50.00

DOCUMENT # L00000010658

1. Entity Name
DUNKERLEY VENTURE ONE, LLC.

Principal Place of Business 4181 AIKEN RD PENSACOLA FL 32503	Mailing Address 4181 AIKEN RD PENSACOLA FL 32503
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902182



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3941 McClellan Rd. Suite, Apt. #, etc.	3. Mailing Address PO Box 30273 Suite, Apt. #, etc.
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City & State Pensacola, FL	City & State Pensacola, FL	4. FEI Number 59-3672820	Applied For Not Applicable
Zip 32503	Country Escambia	Zip 32503	Country Escambia

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

6. Name and Address of Current Registered Agent
DUNKERLEY, DAVID
 4181 AIKEN RD
 PENSACOLA FL 32503

7. Name and Address of New Registered Agent
 Name David Dunkerley
 Street Address (P.O. Box Number is Not Acceptable)
3941 McClellan Rd.
 City Pensacola FL Zip Code 32503

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 [Signature] David Dunkerley, Managing Member DATE 1-6-02

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	MGRM DUNKERLEY, EILEEN 3941 MCCLELLAN RD PENSACOLA FL 32503 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DUNKERLEY, DAVID 4181 AIKEN RD PENSACOLA FL 32503 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Eileen Crabtree <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 2605 Tambridge Cir. Pensacola, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3941 McClellan Rd Pensacola, FL 32503
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: [Signature] David Dunkerley DATE 1-6-02 Daytime Phone # 850-983-5233

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CR2E083 (9/01)