

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000011445

FILED  
Apr 16, 2002 8:00 AM  
Secretary of State

Entity Name: OLIVE ENTERPRISES, L.L.C.

## Current Principal Place of Business:

3357 RAMBLE WOOD CT.  
SARASOTA, FL 34237

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 3319  
SARASOTA, FL 34230

## New Mailing Address:

FEI Number: 65-1062212

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FAMIRLIO, GEORGE V  
1634 MAIN STREET  
SARASOTA, FL 34236 US

## Name and Address of New Registered Agent:

TSIOGAS, DIMITRIOS  
3357 RAMBLEWOOD CT  
SARASOTA, FL 34237 US

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: DIMITRIOS TSIOGAS

04/16/2002

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: OLIVEIRA, JENNIFER  
Address: 3357 RAMBLE WOOD CT.  
City-St-Zip: SARASOTA, FL 34237

Title: MGR ( ) Delete  
Name: MOUSTOGIANNIS, KATHY  
Address: 3357 RAMBLE WOOD CT.  
City-St-Zip: SARASOTA, FL 34237

Title: MGR (X) Delete  
Name: TSIOGGS, DIMITRIOS  
Address: 3357 RAMBLE WOOD CT.  
City-St-Zip: SARASOTA, FL 34237

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: REILLY, ROBERT M  
Address: 515 OSPREY AVE  
City-St-Zip: SARASOTA, FL 34235

Title: MGRM (X) Change ( ) Addition  
Name: TSIOGAS, DIMITRIOS  
Address: 3357 RAMBLEWOOD CT  
City-St-Zip: SARASOTA, FL 34237

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: DIMITRIOS TSIOGAS

MGRM

04/16/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date