

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000011638

1. Entity Name
CERTIFIED TESTING PROPERTIES, L.L.C.

Principal Place of Business
7252 NARCOOSSEE RD
ORLANDO FL 32822

Mailing Address
7252 NARCOOSSEE RD
ORLANDO FL 32822

APPROVED
AND
FILED

01 APR 26 PM 1:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3673222

Applied For

Not Applicable

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

BALLANTYNE, DAWN
7252 NARCOOSSEE RD
ORLANDO FL

Name

300004191383--8

Street Address (P.O. Box Number is Not Applicable)

05/01/01--0110--006

*****50.00 *****50.00

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

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

(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
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
M MEMBER
BALLANTYNE, DAWN
14061 MARINE CT
ORLANDO, FL 32832

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
M MEMBER
BLAKELY JUDY
13942 LAMONT DR
ORLANDO, FL 32832

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
M MEMBER
BLAKELY WILLIAM
13942 LAMONT DR
ORLANDO, FL 32832

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
M MEMBER
BLAKELY JAMES
4999 HEATHERSTONE PL
ORLANDO, FL 32812

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
M MEMBER
BLAKELY TRACY
14405 FRESNO DRIVE
ORLANDO, FL 32832

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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:

Dawn Ballantyne

4-21-01

407-384-7744

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

Date

Daytime Phone #

0026136 AF

CR2E083 (11/00)