2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2003 8:00 am
Secretary of State
06-16-2003 90002 006 ****50.00

DOCUMENT # L00000011638

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

44005070

☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business	Mailing Address
7252 NARCOOSSEE RD ORLANDO FL 32822	7252 NARCOOSSEE RD ORLANDO FL 32822

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

BALLANTYNE, DAWN
7252 NARCOOSSEE RD
ORLANDO FL

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEM BALLANTYNE, DAWN 14051 MARINE CT. ORLANDO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing member	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEM BLAKELY, JUDY 13942 LAMONT DR. ORLANDO FL 32832	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing member	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEM BLAKELY, WILLIAM 13942 LAMONT DR. ORLANDO FL 32832	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing member	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEM BLAKELY, JAMES 4999 HEATHERSTON PL. ORLANDO FL 32812	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing member	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MEM BLAKELY, TRACY 14405 FRESNO DR. ORLANDO FL 32832	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing member	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	managing member	☒ Change ☐ Addition

CR2E083 (10/02)

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 4/15/03 407-384-7744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

Dawn Ballantyne 6/23/03