2001	UNIFORM	BUSINESS	REPORT	(UBR)

				`					
1. Entity Na	me	00014834				·			
SOUTH ANDREWS 800, LLC						FILED			
			•			OLMAR 16 PM	4: 26		
Principal Place of Business C/O WALTER L. MORGAN 315 N.E. THIRD AVE STE. 200		315 N.E. THIRD AVE S	C/O WALTER L. MORGAN 315 N.E. THIRD AVE., STE. 200			SEGRETARY OF S TALLAHASSE, FL			
Fr. CAUDEN	DALE FL 33301	ft. Lauderdale fl 3	3301						
2. Principal Place of Business 3. Mailing Address				7	# 1 30 51 0 12 011 30 511 60 511 0 5 111 06111 30 5111		JE 111111 8 191 1891		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN T	'HIS SPACE	/	
City & Sta	te	City & State		4. FEI	Number	 	Applied For		
Zip	Country	Zip	Coun	try	5. Cert	ificate of Status Desired	\$5.00 Ac Fee Requir		
	6. Name and Address of Curren	t Registered Agent		Name	7. Nam	e and Address of New Registe	red Agent		
	n, walter L Third ave., Ste. 200			Street Addres	s (P.O. Box N	lumber is Not Acceptable)			
	DERDALE FL 33301			<u> </u>	· · · · · · · · · · · · · · · · · · ·	<u>.</u>			
				City		ī	Zip Cod	de	
8. The above	e named entity submits this statement f	or the purpose of changing it	s registere	ed office or regis	tered agent,		• —		
SIGNATURE							,]	
JIGNATORE	Signature, typed or printed name of registered agen	t and title if applicable. (NO	TE: Registered	Agent signature requi	ired when reinstat	ng) D/	ATE		
	ν	FILE N Make Check P		EE IS \$50.00 Department					
9	MANAGING MEME	J BERS/MEMBERS	10.			ADDITIONS/CHAN	GES		
TITLE NAME	Managing Member Walter L. Morgan, Tr	□ Delete rustee u/a/d*	TITLE NAME	1			Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	315 NE 3 Ave., #200 Ft. Lauderdale, FL 3	33301 .		ET ADDRESS ST-ZIP			,′		
TITLE	*11/17/00	☐ Delete	TITLE			300 <u>00391</u> 1		Addition	
NAME STREET ADDRESS CITY-ST-ZIP			1	ET ADDRESS ST-ZIP		-U3/2//U1 *****50.0	-U1838U } *****		
TITLE		☐ Delete	TITLE		·	<u> </u>	☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP	~ ~			ET ADDRESS ST-ZIP	••		•	. • •	
TITLE		☐ Delete	TITLE				Change	☐ Addition	
NAME STREET ADDRESS			NAME	T ADDRESS				. (
CITY-ST-ZIP TITLE		□ Doloto	CITY-	ST-ZIP			Channe	- Addition	
NAME:		☐ Delete	NAME				Change	Addition	
STRÈET ADDRESS CITY-ST-ZIP	•			T ADDRESS ST-ZIP		•			
TITLE NAME		☐ Delete	TITLE				☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP			STREE	T ADDRESS ST-ZIP		•			
11. I hereby of indicated	Lertify that the information supplied with on this report is true and accurate and bility company or the receiver or truste	i that mv signature shali nave	or the exem	nption stated in S	made under pter 608, Flo	nath: that I am a managing me	certify that the in mber or manage	nformation er of the	
SIGNAT	N. Com	Myanas Tau Manag	er L. ging:\N	Morgan /	Trust	ee <u>/12/01</u> 954-524-			
	STATES OF THE CITED ON PRINTED NAME (or pronunc managing member, MA	MAGEN, UK A	WINDHIED REPRE	SENIALIVE	Date	Daytime Phone #	J	