LIMITED LIABILITY COMPANY 2002 UNIFORM BUSINESS REPORT (UBR)

FILED May 22, 2002 8:00 am Secretary of State 05-22-2002 90211 023 ****50.00

1. Entity Name	ENI# LOIOOOO			J		. 50211 025 50.00
DO NOT WRITE IN THIS SPACE						96001 B
2. Principal Place of Business 606 South Owl Drive Suite, Apt. #, etc.		3. Mailing Address P.O. Box 25473 Suite, Apt. #, etc.			DO NOT WRITE IN T	THIS SDACE
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City & State Sarasot	a, Florida	City & State Sarasota,	Flori	ia	4. FEI Number 65-1077190	Applied For Not Applicable
Zip 34234	Country USA	zip 34277	Country USA		5. Certificate of Status Desired	\$5.00 Additional Fee Required
2			-		7. Name and Address of Current	
				Name Doerr, Kenneth D.		
DO NOT WRITE					dress (P.O. Box Number is Not Acceptable) South Pineapple Avenue	
IN THIS SPACE				10th Floor		
Politica de la compansión de la compansi			Giv Sara		sota	FL 34236
8. The above na	amed entity submits this stateme	nt for the purpose of chang	ging its registe	red office or	registered agent, or both, in the State of	Florida.
SIGNATURE	gnature, typed or printed name of regi	stered agent and title if applica	able.		DA	TE
		Make Check	FEE IS \$! Payable to	计数字经验特别 建二烷二烷二	t of State	
			DUE BY N	IAY1		
9.	MANAGING MEME	BERS / MANAGERS	107	L E		
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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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date

Kenneth D. Doerr, MGR 4/30/02

9413666660

Daytime Phone #