2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000001984

Entity Name: DUNEDIN CAFE, LLC

City-St-Zip:

FILED May 01, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 487 MAIN STREET DUNEDIN, FL 33686 **Current Mailing Address: New Mailing Address:** PO BOX 868 LARGO, FL 33779 **FEI Number:** FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOWLAND, MICHAEL HOWLAND, MICHAEL 1406 NORTH FT. HARRISON AVE., UNIT H 1407 NORTH FT. HARRISON AVE., UNIT A CLEARWATER, FL 33755 CLEARWATER, FL 33755 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: MICHAEL HOWLAND 05/01/2002 Electronic Signature of Registered Agent Date **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** () Delete MGR () Change (X) Addition Name: Name: ., . Address: Address: City-St-Zip: City-St-Zip: ., . . Title: Title: MGR () Delete () Change (X) Addition Name: Name: Address: Address: City-St-Zip: City-St-Zip: ., . . . Title: () Delete Title: MGR () Change (X) Addition Name: Name: Address: Address: City-St-Zip: City-St-Zip: Title: () Delete Title: MGR () Change (X) Addition Name: Name: HOWLAND, MICHAEL 1407 N. FT HARRISON AVE UNIT A Address: Address: City-St-Zip: City-St-Zip: CLEARWATER, FL 33755 Title: () Delete Title: MGR () Change (X) Addition Name: Name: Address: Address: City-St-Zip: City-St-Zip: ., . . Title: () Delete Title: MGR () Change (X) Addition Name: Name: Address: Address:

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.

City-St-Zip:

SIGNATURE: MICHAEL HOWLAND MGR 05/01/2002