

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000002130

FILED  
Sep 22, 2002  
Secretary of State

**Entity Name:** GULF COAST PROFESSIONAL CLEANERS LLC

**Current Principal Place of Business:**

5999 SOUTH POINTE BLVD.  
FT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

5999 SOUTH POINTE BLVD.  
FT MYERS, FL 33919

**New Mailing Address:**

**FEI Number:** 65-1076774

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WELCH, JERRY L  
2811 SOUTHWEST 29TH PLACE  
CAPE CORAL, FL 33914 US

**Name and Address of New Registered Agent:**

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MEM ( ) Delete  
Name: WELCH, JAMES L  
Address: 1184 HERRINGTON DR.  
City-St-Zip: MONROE, MI 481614073

Title: MEM ( ) Delete  
Name: WELCH, JERRY L  
Address: 1184 SOUTHWEST 29TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: WELCH, JAMES L  
Address: 1184 HERRINGTON DR.  
City-St-Zip: MONROE, MI 481614073

Title: MGRM (X) Change ( ) Addition  
Name: WELCH, JERRY L  
Address: 1184 SOUTHWEST 29TH PLACE  
City-St-Zip: CAPE CORAL, FL 33914

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.

SIGNATURE: JERRY WELCH

MGRM

09/22/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date