

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000002504

FILED  
Apr 11, 2003  
Secretary of State

**Entity Name:** ALEXANDER S. HANSGEN, LLC

**Current Principal Place of Business:**

7959 44TH AVENUE N  
ST. PETERSBURG, FL 337094205

**New Principal Place of Business:**

2778 WHISPERING DR S  
LARGO, FL 33771

**Current Mailing Address:**

7959 44TH AVENUE N  
ST. PETERSBURG, FL 337094205

**New Mailing Address:**

2778 WHISPERING DR S  
LARGO, FL 33771

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

HANSGEN, ALEXANDER S  
7959 44TH AVENUE N  
ST. PETERSBURG, FL 337094205

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

HANSGEN, ALEXANDER S  
2778 WHISPERING DR S  
LARGO, FL 33771

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

04/11/2003

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGR ( ) Delete  
Name: HANSGEN, ALEXANDER S  
Address: 7959 44TH AVE N  
City-St-Zip: ST PETERSBURG, FL 337094205 US

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: HANSGEN, ALEXANDER S  
Address: 2778 WHISPERING DR S  
City-St-Zip: LARGO, FL 33771 US

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: ALEXANDER S. HANSGEN

MGR

04/11/2003

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