2002 UNIFORM BUSINESS REPORT (UBR)

RAHLER MANATEE. LLC Principal Place of Business 4625 EAST BAY DRIVE Z.P Country 2p Country 2p Country 3	2002	2 UNIFORM BUS	INESS REPO	RT (UBF	.2/1 R)	Mar 29	FILED), 2002 8	3:00 an
KAHLER MANATEE. LLC Principal Place of Business 465 6AST BAY DRIVE SUITE 2019 2. Principal Place of Business Suite April 4, etc. 3. Mailing Address Suite, April 4, etc. 5. Suite, April 4, etc. 5. Suite, April 4, etc. City & State Cry & State	DOCUMENT # L0100003263					Secretary of State		
SUITE 25 SUI	KAHLEF	MANATEE, LLC						
SUITE 25 CLEARWATER FL 30764 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & Sta	Principal Plac	e of Business						
Suite, Apt. #, etc. City & State Country D. Name and Address of Current Registered Agent Name Name Name Name Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code D. The above named entity submits this statement for the purpose of changing its registered eigent, or both, in the State of Florida. SIGNATURE Signature Residence of Incidence agent of the purpose of changing its registered eigent, or both, in the State of Florida SIGNATURE Signature Residence of Registered agent and address (P.O. Box Number is Not Acceptable) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/DHANGES FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/DHANGES CITY-SI-DP CILEARWATER R. 33764 CITY-SI-DP CILEARWATER FL 33768 CITY-SI-DP CILEARWATER FL 33768 CITY-SI-DP CILEARWATER FL 33764 CITY-SI-DP CILEARWATE	SUITE 225		SUITE 225					acra û cira 1 86)
City & State Country Country E. Name and Address of Current Registered Agent T. Name and Address of New Registered Agent F. Name and Address of New Registered Agent RAYMOND, J. PAUL 625 COURT STREET SUITE 200 CLEARWATER PL 33756 City FL Zip Code FL Now!!! FEE IS \$5.0.00 Make Check Payable to Department of State Due By May 1, 2002 9. MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES MARIER NORS SINET ADDRESS CITY-ST-2P CLEARWATER PL 33764 TITLE MGR HOWELL HOWARD L HOWARD L HOWELL HOWARD L HOWELL HOWARD L HOWELL HOWARD L HOWEL HOWARD L HOWELL HOWARD L HOWELL HOWARD L HOWELL HOWARD L HOWARD L HOWELL HOWARD L HOWELL HOWARD L HOWARD L HOWELL HOWARD L HOWELL HOWARD L HOWAR	Principal Place of Business 3. Mailing Addr			dress				
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RAYMOND, J. PAUL 625 COURT STREET SUITE 200 CLEARWATER FL 33756 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. SIGNATURE City FL Zip Code	Zip	Country	Zip	Country			☐ \$5.00 Ad	
RAYMOND, J. PAUL 625 COURT STREET SUITE 200 CLEARWATER FL 33756 City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registated, office or registered agent, or both, in the State of Florida. SIGNATURE Signature Signat		B. Name and Address of Current	Registered Agent~		7. Nam	e and Address of New Re	gistered Agent	
825 COURT STREET SUITE 200 CLEARWATER FL 33758 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. SIGNATURE Signature Title	RAY	- MOND. J. PAUL			<u> </u>			
CLEARWATER FL 33756 City	625	COURT STREET		Street Ac	Idress (P.O. Box I	Number is Not Acceptable)		
8. The above named antity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature inventor or protect name of registered agent and the if supricable.								
SIGNATURE Signature, howed or printed name of registered egent and title if expicable. PROFE Registered Agent signature registrod when reinstaking) DATE FILE NOW!!! FEE IS \$50.00				City		<u></u>	FL Zip Coo	16
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