

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000003328

FILED  
Aug 29, 2003  
Secretary of State

Entity Name: ACOPI LLC

**Current Principal Place of Business:**

1256 BENT OAK TRAIL  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

**Current Mailing Address:**

1256 BENT OAK TRAIL  
ALTAMONTE SPRINGS, FL 32714

**New Mailing Address:**

FEI Number: 59-3681312

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MEAD, GLENDA  
1256 BENT OAK TRAIL  
ALTAMONTE SPRINGS, FL 32714 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: P ( ) Delete  
Name: MEAD, DENISE M  
Address: 1256 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: V ( ) Delete  
Name: MEAD, GLENDA D  
Address: 1256 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: ST ( ) Delete  
Name: MEAD, WILLIAM W  
Address: 1256 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MEAD, DENISE M  
Address: 1256 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR (X) Change ( ) Addition  
Name: MEAD, GLENDA D  
Address: 1256 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: MGR (X) Change ( ) Addition  
Name: MEAD, WILLIAM W  
Address: 1256 BENT OAK TRAIL  
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: GLENDA D. MEAD

MGR

08/29/2003

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