

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

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

05-01-2002 91553 029 ****55.00

DOCUMENT # L01000006966

1. Entity Name

SANFRE ENTERPRISES, INC. LLC,

DO NOT WRITE IN THIS SPACE

949273

2. Principal Place of Business

997 FRANCISCAN AVE

Suite, Apt. #, etc.

3. Mailing Address

997 FRANCISCAN AVE

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

SEBASTIAN, FL

City & State

SEBASTIAN, FL

4. FEI Number

31-1777657

Applied For

Not Applicable

Zip

32958

Country

INDIAN RIVER

Zip

32958

Country

INDIAN RIVER

5. Certificate of Status Desired ☒ **\$5.00 Additional**

Fee Required

7. Name and Address of Current Registered Agent

Name

W. FRED COOK

Street Address (P.O. Box Number is Not Acceptable)

997 FRANCISCAN AVE.

City

SEBASTIAN,

IE FL

Zip Code

32958

8. 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

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE	<u>PRESIDENT</u>
NAME	<u>SANDRA L. COOK</u>
STREET ADDRESS	<u>997 FRANCISCAN AVE</u>
CITY-ST-ZIP	<u>SEBASTIAN, FL 32958</u>
TITLE	<u>VICE PRESIDENT, SALES MANAGER</u>
NAME	<u>W FRED COOK</u>
STREET ADDRESS	<u>997 FRANCISCAN AVE</u>
CITY-ST-ZIP	<u>SEBASTIAN, FL 32958</u>
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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify 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 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: W Fred Cook MANAGING MEMBER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-15-2002

Date

561-589-8131

Daytime Phone #

CR2E083B (12/01)