## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 24, 2002 8:00 am § DOCUMENT # L0100007726 Secretary of State 03-24-2002 90038 030 \*\*\*\*50.00 RWG, LLC Principal Place of Business Mailing Address 148 SE 18TH AVE 148 SE 18TH AVE 800401 DEERFIELD BEACH FL 33441-4535 DEERFIELD BEACH FL 33441-4535 2. Principal Place of Business 3. Mailing Address 1600 E. HILLSBORD BLVD 88 SOUTH MAIN ST. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For DEERFIELD BEACH New YORK earl RIVER 65-1108684 Not Applicable FLORIDA Zip Country Country Zip \$5.00 Additional 5. Certificate of Status Desired 7-12 10965 USA Fee Required 3341-4330 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MURDOCH, ROBERT E Street Address (P.O. Box Number is Not Acceptable) JOHNSON ANSELMO MURDOCH BURKE & GEORGE PA 790 E BROWARD BLVD SUITE 400 FT LAUDERDALE FL 33301 City Zip Code FL 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM TITLE ☐ Change Addition ☐ Delete GANLEY, ROBERT W NAME NAME STREET ADDRESS STREET ADDRESS 148 SE 18TH AVE CITY-ST-ZIP CITY-ST-ZIP DEERFIELD BEACH FL 33441-4535 ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ग्रागेक ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of the receiver of plustee empowered to execute this report as required by Chapter 608, Florida Statutes.

AUTHORIZED REPRESENTATIVE

FILED