2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 05, 2002 8:00 AM
Secretary of State

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Entity Name: 5900 AUSTRALIAN AVENUE, LLC

Current Principal Place of Business:

1803 AUSTRALIAN AVENUE, SUITE D
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

1803 AUSTRALIAN AVENUE, SUITE D
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 65-1105945 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MONCHICK, MICHAEL J
1803 AUSTRALIAN AVENUE, SUITE D
WEST PALM BEACH, FL 33409

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:	MGRM	( ) Delete
Name:	HARKINS, GLENN B JR.	
Address:	510 EVERNIA STREET	
City-St-Zip:	WEST PALM BEACH, FL 33401	
Title:	MGRM	( ) Delete
Name:	GERLACH, C.W.	
Address:	1340 N. OCEAN BLVD.	
City-St-Zip:	PALM BEACH, FL 33480	
Title:	MGRM	( ) Delete
Name:	SPENCER, JERRY L	
Address:	2626 ELECTRONICS WAY	
City-St-Zip:	WEST PALM BEACH, FL 33407	
Title:	MGRM	( ) Delete
Name:	MONCHICK, MICHAEL J	
Address:	1803 SOUTH AUSTRALIAN AVENUE, SUITE D	
City-St-Zip:	WEST PALM BEACH, FL 33409	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: MICHAEL J. MONCHICK MGRM 07/05/2002

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