

FILED
Apr 18, 2002 8:00 am
Secretary of State

03-26-2002 90097 045 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000009971

1. Entity Name

FRUITS PROPERTIES, LLC

Principal Place of Business

31608 U.S. HWY. 19 NORTH
PALM HARBOR FL 34684

Mailing Address

31608 U.S. HWY. 19 NORTH
PALM HARBOR FL 34684

2. Principal Place of Business

12 W. Orange St.

3. Mailing Address

12 W. Orange St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tarpon Springs

City & State

Tarpon Springs

4. FEI Number

59-3756051

Applied For

Not Applicable

Zip
34689

Country
USA

Zip
34689

Country
USA

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILSON, WARREN A III
31608 U.S. HWY. 19 NORTH
PALM HARBOR FL 34884

7. Name and Address of New Registered Agent

Name
Roger G. Fruits

Street Address (P.O. Box Number is Not Acceptable)
2348 Overview Drive

City
New Port Richey

FL

Zip Code
34655

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

Roger G. Fruits
Signature typed or printed name of Registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/18/2002

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

TITLE D ☐ Delete
NAME Fruits, Roger G.
STREET ADDRESS 2348 Overview Drive
CITY-ST-ZIP New Port Richey, FL 34655

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE D ☐ Change ☒ Addition
NAME Fruits, Roger G.
STREET ADDRESS 2348 Overview Drive
CITY-ST-ZIP New Port Richey, FL 34655

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

Roger G. Fruits

SIGNATURE:

SIGNATURE

2/18/2002

727-938-1700

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

Date

Daytime Phone #

CR2E083 (9/01)