2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010610



FILED Mar 18, 2003 8:00 am Secretary of State

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| Principal Place of Business 401 BAYFRONT PLACE UNIT 3506 NAPLES FL 34102 | | Mailing Address 401 BAYFRONT PLACE UNIT 3506 NAPLES FL 34102 | | | III AN AN BANG AN | il Bālis Sāsas | | | |
| 2. Principal | Place of Business | 3. Mailing Address | 3. Mailing Address | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | | | |
| City & State | | City & State | | | 00 0.00.02 | | | Applied For | |
| Zip | Country | Zip | Country | | 5. Certific | ate of Status Desired | | \$5.00 A Fee Requi | Not Applicable |
| | 6. Name and Address of Currer | nt Registered Agent | ' | | 7 Name - | | | | red |
| | | | Name | | 7. Name 8 | and Address of New F | legistered | Agent | |
| PRICE, MARK J ESQ ROETZEL & ANDRESS 850 PARK SHORE DR THIRD FLOOR NAPLES FL 34103 | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | | | City | <u> </u> | | <u> </u> | FL | Zip Co | |
| 8. The above the obligat | named entity submits this statement tions of registered agent. | for the purpose of changing its | registered office | or registere | ed agent, or l | both, in the State of Flo | rida. I am | familiar with | , and accept |
| SIGNATURE | Signature, typed or printed name of registered ager | nt and title if applicable. (NOT | E: Registered Agent sign | 22h vo roquirod v | Ann minut | | | | <u> </u> |
| | | | | | witeri reinstating) | · · · · · · · · · · · · · · · · · · · | DATE | | <u></u> |
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| | | Make Check Payabl | e to Florida D | epartmen | t of State | i | | | |
| | | | By May 1, 20 | | | | | | |
| 9. | MANAGING MEMB | i | | | | | | | |
| TITLE | MGR MGR | | 10. | T | | ADDITIONS/ | CHANGES | | |
| NAME | O'MEARA, WILLIAM J SR. | ☐ Delete | TIŢLE | MGR | | | | X Change | ☐ Addition |
| | | | NAME | O'MEA | ARA, WI | LLIAM J. SR. | | | _ |
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| I hereby ce | ertify that the information supplied with | this filing doop and available to | L | | | | | | |

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. William J. O'Meara, Sr.,

AGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2-18-03

(239) 659-5975