

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90136 045 ****50.00

DOCUMENT # L01000012628

1. Entity Name
MCCARTHY, ENTERTAINMENT, LLC

Principal Place of Business

**421 E. CENTRAL BLVD.
 1404
 ORLANDO, FL 32801**

Mailing Address

**421 E. CENTRAL BLVD.
 1404
 ORLANDO FL 32801**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**431 E Central Blvd
 Suite, Apt. #, etc.
 # 302**

3. Mailing Address

**431 E Central Blvd
 Suite, Apt. #, etc.
 # 302**

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

32801

Country

USA

Zip

32801

Country

USA

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**MCCARTHY, JOSEPH J
 421 E. CENTRAL BLVD
 1404
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name **JOSEPH J. MCCARTHY**

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

431 E Central Blvd # 302

City

Orlando

FL

Zip Code

32801

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Joseph J. McCarthy*

(NOTE: Registered Agent signature required when reinstating)

Aug 15, 2002

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Department of State
 Due By September 25, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
 NAME **MCCARTHY, JOSEPH J**
 STREET ADDRESS **421 E. CENTRAL BLVD., 1404**
 CITY-ST-ZIP **ORLANDO FL 32801**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGRM** ☒ Change ☐ Addition
 NAME **Joseph J. McCarthy**
 STREET ADDRESS **431 E Central Blvd # 302**
 CITY-ST-ZIP **ORLANDO, FL 32801**

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

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

TITLE ☐ Change ☐ Addition
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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.

SIGNATURE:

Joseph J. McCarthy **Aug 15, 2002**

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

Date

Daytime Phone #

CR2E083 (4/02)