

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000013579

FILED  
Jan 16, 2002 8:00 AM  
Secretary of State

Entity Name: WIN & PLACE STABLE, LLC

## Current Principal Place of Business:

1141 S. ROGERS CIRCLE, SUITE 8  
BOCA RATON, FL 33487

## New Principal Place of Business:

1141 S. ROGERS CIRCLE  
SUITE #8  
BOCA RATON, FL 33487

## Current Mailing Address:

1141 S. ROGERS CIRCLE, SUITE 8  
BOCA RATON, FL 33487

## New Mailing Address:

1141 S. ROGERS CIRCLE  
SUITE #8  
BOCA RATON, FL 33487

FEI Number: 65-1130592

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRISINA, RICHARD  
16370 MADDALENA PLACE  
DELRAY BEACH, FL 33446 US

## 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: FRISINA, RICHARD J  
Address: 16370 MADDALENA PLACE  
City-St-Zip: DELRAY BEACH, FL 33487

Title: MGRM ( ) Change (X) Addition  
Name: BOTWINICK, ROBERT  
Address: 5687 VINTAGE OAKS CIRCLE  
City-St-Zip: DELRAY BEACH, FL 33484

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: RICHARD FRISINA

MGR

01/16/2002

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