

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000014376

FILED
Apr 20, 2002 8:00 AM
Secretary of State

Entity Name: BOURNE LOCHRAN HOME REPAIR, LLC

Current Principal Place of Business:

110 FLAGLER LANE
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

110 FLAGLER LANE
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HENNESSEY, DWIGHT F JR
110 FLAGLER LANE
WEST PALM BEACH, FL 33407

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:

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

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

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

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: 0, 0 0 0
Address: 0
City-St-Zip: 0, 0 0 0

Title: MGR () Change (X) Addition
Name: 0, 0 0 0
Address: 0
City-St-Zip: 0, 0 0 0

Title: MGR () Change (X) Addition
Name: 0, 0 0 0
Address: 0
City-St-Zip: 0, 0 0 0

Title: MGRM () Change (X) Addition
Name: HENNESSEY, BETH
Address: 110 FLAGLER LANE
City-St-Zip: WEST PALM BEACH, FL 33407 US

Title: MGR () Change (X) Addition
Name: 0, 0 0 0
Address: 0
City-St-Zip: 0, 0 0 0

Title: MGR () Change (X) Addition
Name: 0, 0 0 0
Address: 0
City-St-Zip: 0, 0 0 0

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: BETH HENNESSEY

MGRM

04/20/2002

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