2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000015020

1. Entity Name



FILED Mar 24, 2003 8:00 am Secretary of State 03-24-2003 90018 017 ****50.00

EUR 27 U	URNY FUND, L.L.C.		Ist.							
Principal Plac	e of Business	Mailing Address								
7505 W. SAND LAKE ROAD ORLANDO FL 32819		7505 W. SAND LAKE ROAD ORLANDO FL 32819								
2. Principal P	lace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE	F MAKING	CHANGES		
City & State		City & State		4. FEI Number APPLIED FOR Applied For						
Zip Country		Zip Country		Section States	82-05	63988		No.	ot Applicable	
						te of Status Desired	F	ee Require		
~~· ~ · · · · · · · · · · · · · · · · ·	6. Name and Address of Current	Registered Agent	· Na	ame	7. Name a	nd Address of New F	Registered A	jent		
WHITTALL, CHARLES				Street Address (P.O. Box Number is Not Acceptable)						
	6 W. Sand Lake Road Ando Fl 32819		50	reet Address (1	P.O. Box Num	Der is Not Acceptable	ө)			
			Ci	ty			FL	Zìp Cod	le	
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registered off	ice or register	ed agent, or b	ooth, in the State of Fl		l miliar with,	and accept	
SIGNATURE .	ाजांड जा स्थ्याहासास्य स्थ्याता.									
	Signature, typed or printed name of registered agent	and title if applicable. (NOTI	E: Registered Agen	t signature required	when reinstating)	I	DATE			
			OW!!! FEE							
		Make Check Payable Due	le to Florida e By May 1,	-	nt of State					
9.	MANAGING MEMBI	ERS/MANAGERS	10.			ADDITIONS	/CHANGES			
TITLE	MGRM	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS	WHITTALL, CHARLES		NAME Street add	npree						
CITY-ST-ZIP	7505 W. SAND LAKE ROAD ORLANDO FL 32819		CITY-ST-ZI	E .						
TITLE	MGRM	☐ Delete	TITLE					☐ Change	Addition	
NAME	MAHER, LEE J		NAME				,			
STREET ADDRESS	7505 W. SAND LAKE ROAD		STREET ADD	RESS						
CITY-ST-ZIP	ORLANDO FL 32819		CITY-ST-ZI	P						
TITLE NAME	AND COMMENT OF STREET	Delete	TITLE	- , - > `	" * *** ** -		عب ساد د المان	Change	□ Addition	
STREET ADDRESS		•	STREET ADD	RESS						
CITY-ST-ZIP			CITY-ST-ZI	P						
TITLE		☐ Delete	TITLE				(Change	☐ Addition	
NAME			NAME							
STREET ADDRESS			STREET ADD							
CITY-ST-ZIP			CITY-ST-ZI	,						
TITLE		☐ Delete	TITLE					Change	☐ Addition	
NAME STREET ADDRESS			NAME Street Add	BESS						
CiTY-ST-ZIP			CITY-ST-ZI	1						
TITLE		☐ Delete	TITLE			•		Change	☐ Addition	
NAME			NAME					-		
STREET ADDRESS			STREET ADD							
CITY-ST-ZIP			CITY-ST-ZII							
indicated	ertify that the information supplied with on this report is true and accurate and bility company or the receiver of truste	that my signature shall have t	the same lega	I effect as if m	ade under oa	th; that I am a manag	I further certif ging member	y that the in or manage	iformation r of the	

SIGNATURE: