

# LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**

03 APR 18 AM 8:55  
03-14-2003 9006 006 \*\*\*\*\*50100

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

DOCUMENT # L01000015540

1. Entity Name

HIPPOCRATIC POLLING, LLC



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

SBO DENARVAEZ DRIVE

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 3319

Suite, Apt. #, etc.

City & State

LONGBOAT KEY, FLORIDA

City & State

SARASOTA, FLORIDA

4. FEI Number

59-3743669

Applied For

Not Applicable

Zip

34228

Country

Zip

34230

Country

5. Certificate of Status Desired

\$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

**DO NOT WRITE IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

*WM John Carson*

WM JOHN CARSON 10 MARCH 03

DATE

FEES \$50.00

Make Check Payable to Florida Department of State  
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	WILLIAM JOHN CARSON
STREET ADDRESS	SBO DENARVAEZ DRIVE
CITY-ST-ZIP	LONGBOAT KEY, FL 34228
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

CR2E083B (12/02)

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:

*WM John Carson*

10 MARCH 03

Date

941-333-6876

Daytime Phone #