7/2/2002-90818-005

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Aug 06, 2002 8:00 am
Secretary of State
07-02-2002 90818 005 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000019438

1. Entity Name
DANIESJUD & CO.,LC

Principal Place of Business
3452 COOK CIRCLE
VERNON FL 32462
US

Mailing Address
3452 COOK CIRCLE
VERNON FL 32462
US

[redacted]

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3452 Cook Circl	3452 Cook Circle
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Vernon Fl.	City & State: Vernon Fl.
Zip: 32462. Country: US	Zip: 32462 Country: US

4. FEI Number 593-25-4476 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
MORRIS, DANIEL B
3452 COOK CIRCLE
VERNON FL 32462
Same

7. Name and Address of New Registered Agent
Name: n/a
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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.

SIGNATURE ______ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM COSSON, JUDY B 3452 COOK CIRCLE VERNON FL 32462 Same. ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (9/01)

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: SIGNATURE REQUIRED 06-29-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #