

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

C 8-531

DOCUMENT # L01000019919

1. Entity Name
MILLENNIUM INSTALLS, LLC

03-13-2002 90098 048 *****50.00

Principal Place of Business

**801 22ND STREET NORTH
 ST PETERSBURG FL 33713**

Mailing Address

**801 22ND STREET NORTH
 ST PETERSBURG FL 33713**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent

Name T.S. Chechela, P.A.

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

5625 Central Ave

City St Petersburg

FL

Zip Code

33710

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

T.S. Chechela

2/11/2002

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

9. MANAGING MEMBERS / MANAGERS

TITLE **MGRM**
 NAME **YATES, STEPHEN P**
 STREET ADDRESS **801 22ND STREET NORTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33713**

☒ Delete

TITLE **MGRM**
 NAME **TOTH YATES, KARA CATHLEEN**
 STREET ADDRESS **801 22ND STREET NORTH**
 CITY-ST-ZIP **ST PETERSBURG FL 33713**

☐ Delete

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10. ADDITIONS / CHANGES

TITLE
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 CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

Kara C Yates

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

1/26/02 727 321 8334

Date

Daytime Phone #

CR2E083 (9/01)