

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000020071

FILED
Jan 13, 2002 8:00 AM
Secretary of State

Entity Name: FREEDOM PROPERTIES, LLC

Current Principal Place of Business:

1512 S. ARRAWANA AVE.
TAMPA, FL 33629

New Principal Place of Business:

Current Mailing Address:

PO BOX 3147
TAMPA, FL 336013147

New Mailing Address:

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

Name and Address of Current Registered Agent:

COLLINS, CARLETON B
1512 S. ARRAWANA AVE.
TAMPA, FL 33629 US

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:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: COLLINS, RENE M MRS.
Address: 1512 S. ARRAWANA AVENUE
City-St-Zip: TAMPA, FL 33629 US

Title: MGRM () Change (X) Addition
Name: COLLINS, CARLETON B MR.
Address: 1512 S. ARRAWANA AVENUE
City-St-Zip: TAMPA, FL 33629 US

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: CARLETON BURKE COLLINS

MGRM

01/13/2002

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