2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000020960 1. Entity Name



FILED Apr 17, 2003 8:00 am Secretary of State
04-17-2003 90028 043 ****50.00

HALO PO	ro rrc						
Principal Plac 3629 AIKEN CO WELLINGTON F	OURT	Mailing Address 3629 AIKEN COURT WELLINGTON FL 33414		1.188(18)1.20	a Pid a Juan a B aha Ba ha Ba ha Ba ha	841 88 71 8 48818 (1
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City.& State		City & State		4. FEI Number	31-1813751		oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of		\$5.00 Ad Fee Require	
	6. Name and Address of Current	t Registered Agent		7. Name and Ad	Idress of New Registered A	\gent	
	1004 007414		Name			<u> </u>	
MELISSA POTAMKIN GANZI 3629 AIKEN COURT WELLINGTON FL 33414			Street Addres	s (P.O. Box Number is	s Not Acceptable)		
			City		FL	Zip Coo	le
	named entity submits this statement fions of registered agent.	or the purpose of changing its	registered office or regis	tered agent, or both, i	in the State of Florida. I am f	amiliar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	: Registered Agent signature requi	red when reinstating)	DATE		
·		ell e hie	NAME = = 10 000 0				
		1	OW!!! FEE IS \$50.00				
			e to Florida Departm	ient of State			ļ
			e By May 1, 2003	ient of State	_		
9.	MANAGING MEMB	Due	•	lent of State	ADDITIONS/CHANGES		
9.	MGRM	Due	By May 1, 2003	ient of State	ADDITIONS/CHANGES	Change	☐ Addition
	MGRM MELISSA POTAMKIN GANZI	Due ERS/MANAGERS	By May 1, 2003	lent of State	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE	MGRM	Due ERS/MANAGERS	10.	ent of State	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE NAME	MGRM MELISSA POTAMKIN GANZI	Due ERS/MANAGERS	By May 1, 2003 10. TITLE NAME	ient of State	ADDITIONS/CHANGES	☐ Change	Addition
TITLE NAME STREET ADDRESS	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	Due ERS/MANAGERS	10. TITLE NAME STREET ADDRESS	ient of State	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	Due ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ient of State	ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	Due ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	ient of State	ADDITIONS/CHANGES		
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	Due ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ient of State	ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	Due ERS/MANAGERS Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE	ient of State	ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Ar was see see see see	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete	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	ent of State	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ent of State	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete	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	ent of State	ADDITIONS/CHANGES	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete Delete	By May 1, 2003 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	ent of State	ADDITIONS/CHANGES	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ent of State	ADDITIONS/CHANGES	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	went of state	ADDITIONS/CHANGES	☐ Change ☐ Change ☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE TITLE NAME TITLE	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete Delete	By May 1, 2003 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	y√. ora ⊃'a . a . a . a	ADDITIONS/CHANGES	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ent of State	ADDITIONS/CHANGES	☐ Change ☐ Change ☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT WELLINGTON FL 33414	ERS/MANAGERS Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	whit of State	ADDITIONS/CHANGES	☐ Change ☐ Change ☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT WELLINGTON FL 33414	Due ERS/MANAGERS Delete Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	A COMPANY OF THE PARK OF THE P	ADDITIONS/CHANGES	Change Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT WELLINGTON FL 33414	ERS/MANAGERS Delete Delete Delete	By May 1, 2003 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ent of State	ADDITIONS/CHANGES	☐ Change ☐ Change ☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME TITLE NAME TITLE NAME	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT WELLINGTON FL 33414	Due ERS/MANAGERS Delete Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ent of State	ADDITIONS/CHANGES	Change Change Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE	MGRM MELISSA POTAMKIN GANZI 3629 AIKEN COURT WELLINGTON FL 33414	Due ERS/MANAGERS Delete Delete Delete Delete Delete	By May 1, 2003 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	ent of State	ADDITIONS/CHANGES	Change Change Change	Addition 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 flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE