

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000022461

Entity Name: TAYLOR MED, LLC

FILED
Jan 21, 2003
Secretary of State

Current Principal Place of Business:

411 BARCLAY AVE
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

1161 SABLE KEY CIRCLE
PORT ORANGE, FL 32128

Current Mailing Address:

411 BARCLAY AVE
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

1161 SABLE KEY CIRCLE
PORT ORANGE, FL 32128

FEI Number: 02-0539633

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOEBING, ROBERT J
411 BARCLAY AVE
ALTAMONTE SPRINGS, FL 32701

Name and Address of New Registered Agent:

HOEBING, ROBERT J
1161 SABLE KEY CIRCLE
PORT ORANGE, FL 32128

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:

01/21/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: HOEBING, ROBERT J
Address: 411 BARCLAY AVE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: HOEBING, ROBERT J
Address: 1161 SABLE KEY CIRCLE
City-St-Zip: PORT ORANGE, FL 32128

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: ROBERT J HOEBING

MGRM

01/21/2003

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