

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000022661

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

Entity Name: RIPLEY'S AQUATIC NURSERY, LLC

Current Principal Place of Business:

16304 S.E. COUNTY ROAD 225
MICANOPY, FL 32667

New Principal Place of Business:

Current Mailing Address:

16304 S.E. COUNTY ROAD 225
MICANOPY, FL 32667

New Mailing Address:

FEI Number: 30-0016864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RIPPERGER, WESLEY GRAHAM III
16304 S.E. COUNTY ROAD 225
MICANOPY, FL 32667

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: RIPPERGER III, WESLEY G MGRM
Address: 16304 SE CNTY RD. 225
City-St-Zip: MICANOPY, FL 32667 US

Title: MGR () Change (X) Addition
Name: RIPPERGER JR., WESLEY G MGR
Address: 16304 SE CNTY RD. 225
City-St-Zip: MICANOPY, FL 32667 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: WESLEY GRAHAM RIPPERGER III

MGRM

02/13/2002

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