

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000001043

FILED  
Apr 09, 2003  
Secretary of State

Entity Name: J.S. STIRLING, INTERNATIONAL, L.L.C.

**Current Principal Place of Business:**

8220 29TH AVENUE N.  
ST. PETERSBURG, FL 33710 US

**New Principal Place of Business:**

**Current Mailing Address:**

8220 29TH AVENUE N.  
ST. PETERSBURG, FL 33710 US

**New Mailing Address:**

PO BOX 48892  
ST. PETERSBURG, FL 33743 US

FEI Number: 01-0577538

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOCCUTI, MICHAEL J  
8220 29TH AVENUE N.  
ST. PETERSBURG, FL 33710 US

**Name and Address of New Registered Agent:**

MALLER, KAREN E ESQ.  
ONE PROGRESS PLAZA  
SUITE 1210  
ST. PETERSBURG, FL 33701 US

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: KAREN E MALLER, ESQ.

04/09/2003

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: WALLACE, BLAKE  
Address: 7301 37TH AVENUE N.  
City-St-Zip: ST. PETERSBURG, FL 33710 US

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Change (X) Addition  
Name: BOCCUTI, MICHAEL J  
Address: 8220 29TH AVENUE N.  
City-St-Zip: ST. PETERSBURG, FL 33710 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: MICHAEL J BOCCUTI

MGRM

04/09/2003

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