2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State
03-31-2003 90807 046 ****50.00

DOCUMENT # L02000001111

1. Entity Name
PEACHWOOD, LLC

Principal Place of Business	Mailing Address
112 N. FLORIDA AVE. DELAND FL 32720	112 N. FLORIDA AVE. DELAND FL 32720

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
925 N. SPRING GARDEN Ave.	925. N. SPRING GARDEN Ave.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: DeLAND, FL	City & State: DeLAND, FL
Zip: 32720 Country: USA	Zip: 32720 Country: USA

4. FEI Number: 26-0034609 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TAYLOR, RICHARD W 112 N. FLORIDA AVE. DELAND FL 32720	Name: BALLINGER, STEVEN R. Street Address (P.O. Box Number is Not Acceptable): 412 SE 18 STREET City: FORT LAUDERDALE FL Zip Code: 33316

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: S R Ballinger
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER Lauri L. Adams 925 N. SPRING GARDEN Ave. DeLand FL 32720 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER Henry P. McKelvey 925 N. SPRING GARDEN Ave. DELAND, FL 32720 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER LARRY GILDERMAN DO 925 N. SPRING GARDEN AVE. DELAND, FL 32720 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGING MEMBER BRIAN GILDERMAN 925 N. SPRING GARDEN Ave. DELAND, FL 32720 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☑ Change ☐ Addition

CR2E083 (10/02)

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 liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE REQUIRED Lauri Adams 386-740-0770
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #