

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91003 002 ****55.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

30062999

DOCUMENT # L02000003008 1. Entity Name BCI ASSOCIATES, L.L.C.																																	
Principal Place of Business 337 EAST INDIANTOWN ROAD SUITE 8 JUPITER, FL 33477			Mailing Address 337 EAST INDIANTOWN ROAD SUITE 8 JUPITER, FL 33477																														
2. Principal Place of Business 580 Village Blvd. Suite, Apt. #, etc. Suite # 300 City & State West Palm Beach, FL Zip 33409 Country U.S.A.		3. Mailing Address 580 Village Blvd. Suite, Apt. #, etc. Suite # 300 City & State West Palm Beach Zip 33409 Country U.S.A.																															
☐ CHECK HERE IF MAKING CHANGES																																	
4. FEI Number 01-0595235 Applied For ☐ Not Applicable			5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required																														
6. Name and Address of Current Registered Agent WHITE, JOHN II 1645 PALM BEACH LAKES BLVD., SUITE 1200 C/O NASON, YEAGER, GERSON, WHITE & LIOCE WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name Denholtz, Stewart F. Street Address (P.O. Box Number is Not Acceptable) 580 Village Blvd. Suite # 300 City West Palm Beach FL Zip Code 33409																														
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 <u><i>CE Denholtz</i></u> DATE <u><i>4/25/03</i></u> (NOTE: Registered Agent's signature required when withdrawing.)																																	
FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003																																	
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left;">9. MANAGING MEMBERS/MANAGERS</th> <th colspan="2" style="text-align: left;">10. ADDITIONS/CHANGES</th> </tr> </thead> <tbody> <tr> <td style="width: 50%; padding: 5px;"> TITLE MGRM NAME BCI MANAGERS, L.L.C. STREET ADDRESS 337 EAST INDIANTOWN ROAD CITY-ST-ZIP JUPITER, FL 33477 </td> <td style="width: 50%; padding: 5px;"> ☐ Delete </td> <td style="width: 50%; padding: 5px;"> TITLE 580 Village Blvd. - Suite # 300 NAME West Palm Beach, FL 33409 STREET ADDRESS West Palm Beach, FL 33409 CITY-ST-ZIP West Palm Beach, FL 33409 </td> <td style="width: 50%; padding: 5px;"> ☐ Change ☐ Addition </td> </tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Change ☐ Addition</td></tr> <tr><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Delete</td><td style="padding: 5px;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td><td style="padding: 5px;">☐ Change ☐ Addition</td></tr> </tbody> </table>						9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES		TITLE MGRM NAME BCI MANAGERS, L.L.C. STREET ADDRESS 337 EAST INDIANTOWN ROAD CITY-ST-ZIP JUPITER, FL 33477	☐ Delete	TITLE 580 Village Blvd. - Suite # 300 NAME West Palm Beach, FL 33409 STREET ADDRESS West Palm Beach, FL 33409 CITY-ST-ZIP West Palm Beach, FL 33409	☐ 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	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	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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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 606, Florida Statutes. SIGNATURE: <u><i>CE Denholtz</i></u> DATE: <u><i>4/25/03</i></u> TELEPHONE: <u><i>561-242-0900</i></u> SIGNATURE AND TYPED OR PRINTED NAMES OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE																																	

CR2E033 (1/0/02)