2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2003 8:00 am
Secretary of State
07-25-2003 90065 024 ****50.00

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DOCUMENT # L02000008786

1. Entity Name

FLORIDA OFSC, LLC

Principal Place of Business	Mailing Address
855 MASON AVENUE DAYTONA BEACH FL 32117	855 MASON AVENUE DAYTONA BEACH FL 32117

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
549 Health Blvd	549 Health Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Daytona Beach Fl.	City & State: Daytona Bch Fl.
Zip: 32117 Country: USA	Zip: 32115 Country: USA

4. FEI Number: 02-0583933 ☐ 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
PALMETTO CHARTER SERVICES, INC. 150 MAGNOLIA AVENUE DAYTONA BEACH FL 32114	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR FLEUCHAUS, PHILIP T 855 MASON AVENUE DAYTONA BEACH FL 32117	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change 549 Health Blvd Daytona Beach, Fl. 32115	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR SCHALIT, CURTIS 855 MASON AVENUE DAYTONA BEACH FL 32117	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR AKERS, JOHN O 855 MASON AVENUE DAYTONA BEACH FL 32117	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR GAINES, RICHARD T 855 MASON AVENUE DAYTONA BEACH FL 32117	☒ 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 (4/03)

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: Dilas Schalit REQUIRED 7/21/2003 3862526438
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #