## **2003 LIMITED LIABILITY COMPANY**

## **UNIFORM BUSINESS REPORT (UBR)**

## FILED Sep 18, 2003 8:00 am Secretary of State 09-18-2003 90001 019 \*\*\*\*55.00

1. Entity Name

STREET ADDRESS

PATRIC	v o	ACC	CIA'	TEC	110
r A I DIO	ΝQ	HOU		ILO,	

PATRICK	& ASSUCIATES, LLC								
Principal Place of Business 1143 SE 33RD STREET CAPE CORAL FL 33904		Mailing Address 1143 SE 33RD STREET CAPE CORAL FL 33904				adici Abilo 1919; 11918 11	101 (1 <b>4</b> 5 188)		
2. Principal F	Place of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.	<del></del>		CHECK HERE IF MAKING CHANGES				
City & Stat	de .	City & State			4. FEI Number Applied For Not Applicable				
Zip Country		Zip	Zip Country		5. Certificate of Status Desired \$5.00 Addition Fee Required		itional		
	6. Name and Address of Curi	rent Registered Agent	istered Agent		7. Name and Address of New Registered Agent				
				Name					
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				Street Address (P.O. Box Number is Not Acceptable)					
IALL	WINDOLL IE OZOGI ZOZO		. }	City		FL Zip Cod	e		
					<u> </u>				
the obligat	named entity submits this stateme lions of registered agent.	int for the purpose of changing it	is registere	a office or registere	ed agent, or both, in the State of Florida.	i am iamiliar with,	and accept		
SIGNATURE .	Signature, typed or printed name of registered a	agent and title if applicable. (NO	TE: Registered	Agent signature required	when reinstating)	DATE			
		FILE N	IOWIII E	EE IS \$50.00	·				
		Make Check Payat			nt of State				
	<u>}</u> :			ber 24, 2003			l		
	AMANIA CINIC ME		<u> </u>		A DOUTION COLOR	MOTO			
9.	MGRM	MBERS/MANAGERS	10.		ADDITIONS/CHA		Addition		
TITLE N <b>å</b> ME	PATRICK, KENNETH R	☐ Delete	TITLE	1		☐ Change	☐ Addition		
STREET ADDRESS	1143 SE 33RD STREET		·	T ADDRESS	•				
CITY-ST-ZIP	CAPE CORAL FL 33904		CITY-						
TITLE .	MGRM	□ Delete	TITLE			Change	☐ Addition		
NAME	PATRICK, ELAINE	□ Delete	NAME		•		☐ Addition		
STREET ADDRESS	1143 SE 33RD STREET			T ADDRESS					
CITY-ST-ZIP	CAPE CORAL FL 33904		CITY-	ì			}		
TITLE	· ·	Delete	TITLE			☐ Change	Addition		
NAME .	_			ے تحیت					
STREET ADDRESS		يستعين والهيها	STREE	T ADDRESS			1		
CITY-ST-ZIP	,		CITY-	ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition		
NAME			NAME	}			_		
STREET ADDRESS		•	STREE	T ADDRESS					
CITY-ST-ZIP		·	CITY-S	ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	Addition		
NAME			NAME						
STREET ADDRESS				T ADDRESS					
CITY-ST-ZIP			CITY-S	ST-ZIP					
TITLE		☐ Delete	TITLE			☐ Change	☐ Addition		
UALAE [			44 4 5 4 5	1			1		

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 executable legal effect as if made under oath; that I am a managing member or manager of the

PATRICK & ASSOC., LLC

STREET ADDRESS CITY-ST-ZIP

(1)143 S E 33rd STREET