2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000013822



Mailray Address SISS ANDSRIR RRAD MATLAND FL 32751 2. Principal Place of Business Suite. Apt. # .etc. City & State A FEI Number S. Certificate of Status Desided State Address of Current Registered Agent T. Name and Address of New Registered Agent WAIKER, BERRY J JR 235 MATLAND AVENUE SOUTH, SUITE 216 MATLAND FL 32751 Street Address of Current Registered Agent City FL City FL City FL City FL City FL City FL City FL City FL City Mathematical in the State of Florida. Far mainfair with, and accomplete the production of registered agent. FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due by May 1, 2003 PRIE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due by May 1, 2003 PRIE NOW!!! FEE IS \$50.00 MATLAND FL 32751 MARKER AGENESS CITY 57-29 MATLAND FL 32751 THE MARKER AGENESS CITY 57-29 City ST-29 Change Additional Change Additional Additional Far Agents Agents Additional Far Agents Agents	1. Entity Name GUARDIAN ALEXANDRIA POINTE HOLDINGS, LLC						FILED 3 MAR 17 PM	2: 11			
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Applicable Country Zip Country S. Certificate of Status Desired S. S. Option S. S. Certificate of Status Desired S. S. Option			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WALKER, BERRY J JR 235 MATILAND AVENUE SOUTH, SUITE 216 MATILAND FL 32751 6. The above named antity 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. NOTE Registered Agent septials in signal when retreating to 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. NOTE Registered Agent septials in signal when retreating to the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS SSO.00 Make Check Payable to Florida Department of State Due By May 1, 2003 9. MANAGING MEMBERS /MANAGERS Prit. NAME GUARDIAN EQUITIES, INC 15THE NOW! STRET ADDRESS GUY-ST-2P MATILAND FL 32751 Delete MILE Delete MILE MILE Delete MILE	City & State		City & State			4. FEI Nur	52 - 2366°	364	_ 	'	
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WALKER, BERRY J. IR 235 MATLAND AVENUE SOUTH, SUITE 216 MATLAND FL 32751 6. 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 NOTE Registered Agent appearance in 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 and itself applicable. NOTE Registered Agent appearance registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of Florida. I am familiar with, and accept the		6. Name and Address of Current	Registered Agent				7. Name and Address of New Registered Agent				
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8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, it am familiar with, and accept the obligations of registered agent. Signature Signa	235	MAITLAND AVENUE SOUTH, SUI	TE 216		Street Addres	itreet Address (P.O. Box Number is Not Acceptable)					
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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 be execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

MANAGING NEWBER MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)