04-11-2003 90013 020 **** 55.00

03/30/03

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

L02000014265 DOCUMENT # L02000014265 FILED 1. Entity Name JOHNSON TWILIGHT ENTERPRISES LLC 2003 JUL -7 AM 11: 33 DIVIDION OF CORPORATIONS Principal Place of Business Mailing Address FAMILAHASSEE FLORIDA 3114 37TH TERRACE EAST 3114 37TH TERRACE EAST **BRADENTON FL 34208 BRADENTON FL 34208** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 45 City & State City & State Applied For Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SCOVILL H. WILLIAM 1605 MAIN STREET, SUITE 912 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34236 City 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 (NOTE: Registered Agent signature required when reinstating FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Department of State Due By May 1, 2003 MANAGING MEMBERS/MANAGERS ADDITIONS/CHANGES 9. 10. NAMENGRI CED TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS E. 34208 CITY-ST-ZIP CITY-ST-ZIP NAME PURES Delete TITLE ☐ Chance ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAME NOTESS TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CLTY-ST-ZIP CITY-ST-ZIP NAME WORD ☐ Delete TITLE Change Addition SAUL Johnson 1 NAME 3114 37 southerr. E. STREET ADDRESS STREET ADDRESS Bradentow, FL 34208 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE CT Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filling 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 it made under oath; that I am a managing member or manager of the limited flability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.