2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000016398

1. Entity Name

CLENDENNING ENTERPRISES, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 DEC 15 AM 9:19

Principal Place of Business	Mailing Address
2607 CLENDENNING DR. TAMPA FL 33624	12607 CLENDENNING DR. TAMPA FL 33624

☑ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
3509 EHRlich Rd Suite, Apt. #, etc.	3509 E HRlich Rd Suite, Apt. #, etc.
City & State: TAMPA FL	City & State: TAMPA FL
Zip: 33618 Country:	Zip: 33618 Country:

4. FEI Number: 82-0551302 ☐ 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
COOK & KOCH, P.A. ONE TAMPA CITY CENTER, STE. 3010 201 NORTH FRANKLIN ST TAMPA FL 33602	Name: DONALD Collado & Co Street Address (P.O. Box Number is Not Acceptable): 14479 BRUCE B DOWNS Blvd City: Tampa FL Zip Code: 33613

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: ~~Clendenning Enterprises~~ Donald Collado & Co ~~LLC~~ DATE: 12/4/03

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	☐ 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 President Robert Panarundo 3509 EHRlich Rd Tampa FL 33618
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☑ Addition V. Pres MARIANE PANARUNDA 3509 EHRlich Rd Tampa FL 33618
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

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: ~~Cook & Koch P.A.~~ See 1st Page 10/15/03 (813) 965-1926

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CR2E083 (4/03)

14479 Bruce B Downs Blvd
Tampa, FL 33613
Ph (813)977-1313
Fax (813)977-3399

Donald Collado & Company

Fax

To: Florida Department of State **From:** Donald collado/Janet

Fax: **Pages:** 3

Phone: **Date:** 12/11/03

Re: **CC:**

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

This was mailed back with the corrections on November 4th 2003. Our client called your office and she was told there is no record of it. We are faxing the copy to you. If you need anything else to correct this, please let our office know.