

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000016849

FILED  
Mar 19, 2003  
Secretary of State

Entity Name: ALLIANT CAREFREE LLC

## Current Principal Place of Business:

1705 N 16TH STREET  
TAMPA, FL 33605

## New Principal Place of Business:

## Current Mailing Address:

1705 N 16TH STREET  
TAMPA, FL 33605

## New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

FOWLER WHITE BOOGS BANKER P.A.  
501 E KENNEDY BOULEVARD STE. 1700  
TAMPA, FL 33605 US

## Name and Address of New Registered Agent:

ALFONSO, CARLOS J  
1705 N. 16TH STREET  
TAMPA, FL 33605 US

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.

SIGNATURE: CARLOS J. ALFONSO

03/19/2003

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR ( ) Change (X) Addition  
Name: ALFONSO, CARLOS J  
Address: 1705 N. 16TH STREET  
City-St-Zip: TAMPA, FL 33605 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: CARLOS J. ALFONSO

MGR

03/19/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date