

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2003 8:00 am
Secretary of State

05-09-2003 90055 008 ****50.00

DOCUMENT # L02000018363

1. Entity Name
PHOSROCK LTD. CO.



Principal Place of Business
1235 SUMMIT CHASE DRIVE
LAKE LAND FL 33813

Mailing Address
1235 SUMMIT CHASE DRIVE
LAKE LAND FL 33813

2. Principal Place of Business
1235 SUMMIT CHASE DR.

3. Mailing Address
PO Box 800

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
LAKE LAND

City & State
LAKE LAND, FL

Zip
33813

Country
US

Zip
33802

Country
US

4. FEI Number
02-068-9687

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BROOKS, GEORGE C
1235 SUMMIT CHASE DRIVE
LAKE LAND FL 33813

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MSR.
GEORGE C Brooks
1235 SUMMIT CHASE DR.
LAKE LAND, FL 33813

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

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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: George C Brooks
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

May 1, 2003

Date

863-646-8004

Daytime Phone #

CR2E083 (10/02)