2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003
Secretary of State

DOCUMENT# L02000018455

Entity Name: CAROZO, LLC

Current Principal Place of Business:

5161 NEPONSET AVE.
ORLANDO, FL 32808

New Principal Place of Business:

Current Mailing Address:

5161 NEPONSET AVE.
ORLANDO, FL 32808

New Mailing Address:

FEI Number: 11-3644008 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FINANCIAL FOUNDATIONS, INC.
3150 SANDY RIDGE DR.
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete
Name: SCOTT, RODERICK B
Address: 5161 NEPONSET AVE.
City-St-Zip: ORLANDO, FL 32808

Title: MGR ( ) Delete
Name: GRAHAM, ALONZO A
Address: PO BOX 6621
City-St-Zip: ORLANDO, FL 34478

Title: MGR ( ) Delete
Name: RHOWE, CARL D
Address: 5161 NEPONSET AVE.
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: SCOTT, RODERICK B
Address: 7724 COVEDALE DR
City-St-Zip: ORLANDO, FL 32818

Title: MGR (X) Change ( ) Addition
Name: GRAHAM, ALONZO A
Address: PO BOX 6621
City-St-Zip: OCALA, FL 34478

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: CARL D. RHOWE MGR 04/28/2003

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