

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 02, 2003 8:00 am
Secretary of State

5/1

05-01-2003 90272 020 ****50.00

DOCUMENT # L02000019247

1. Entity Name

ALEXANDER-BRADLEY, LLC



Principal Place of Business

55 LUCAS LANE
MONTEVALLO AL 35115

Mailing Address

55 LUCAS LANE
MONTEVALLO AL 35115

44003179



2. Principal Place of Business

3610 Cherry Laurel Drive
Suite, Apt. #, etc.

3. Mailing Address

3610 Cherry Laurel Drive
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

Pensacola FL

City & State

Pensacola FL

4. FEI Number

74-1840541

Applied For

Not Applicable

Zip

32504

Country

Escambia

Zip

32504

Country

Escambia

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARMON, RICHARD B
8917 NORTH DAVIS HIGHWAY
PENSACOLA FL 32514

7. Name and Address of New Registered Agent

Name James Harmon

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

3610 Cherry Laurel Drive

City Pensacola

FL

Zip Code 32504

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

James Harmon

James Harmon

4/27/03

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

(NOTE: Registered Agent signature required when re-registering)

DATE

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

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARMON, RICHARD B 8917 NORTH DAVIS HIGHWAY PENSACOLA FL 32514	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARMON, JAMES A 55 LUCAS LANE MONTEVALLO AL 35115	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HARMON, LOREN C 55 LUCAS LANE MONTEVALLO AL 35115	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3610 Cherry Laurel Drive Pensacola FL 32504	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3610 Cherry Laurel Drive Pensacola FL 32504	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

James Harmon

4/27/03

850 341 0197

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)