

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

DOCUMENT # L02000019517

1. Entity Name

PRI, LLC



**FILED
May 05, 2003 8:00 am
Secretary of State**

05-05-2003 92176 014 ****55.00

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
6542 Hypoluxo Rd

3. Mailing Address
6542 Hypoluxo Rd

Suite, Apt. #, etc.
Suite 271

Suite, Apt. #, etc.
Suite 271

City & State
Lake Worth, FL

City & State
Lake Worth, FL

Zip
33467

Zip
33467

Country

4. FEI Number
43-1969394

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Richard K. Meder

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

6664 Hatteras Drive

City Lake Worth

FL Zip Code
33467

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

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

Managing Member

4/30/03

DATE

**FEES IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
Meder, Richard K.
6664 Hatteras Drive
Lake Worth, FL 33467

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

Richard K. Meder

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

Date

Daytime Phone #

Richard K. Meder

CR2E083B (12/02)