

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000022078

FILED  
May 01, 2003  
Secretary of State

**Entity Name:** SIMMONS CONSULTING & PUBLIC AFFAIRS, LLC

**Current Principal Place of Business:**

4839 NW 55TH DRIVE  
COCONUT CREEK, FL 33073

**New Principal Place of Business:**

**Current Mailing Address:**

4839 NW 55TH DRIVE  
COCONUT CREEK, FL 33073

**New Mailing Address:**

**FEI Number:** 56-2339130

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

APPLEBY, HOMER P  
3245 SAINT JAMES DRIVE  
BOCA RATON, FL 33434 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: MGRM ( ) Delete  
Name: SIMMONS, JARROD  
Address: 4839 NW 55TH DRIVE  
City-St-Zip: COCONUT CREEK, FL 33073

Title: MGRM ( ) Delete  
Name: SIMMONS, LARRY  
Address: 4839 NW 55TH DRIVE  
City-St-Zip: COCONUT CREEK, FL 33073

**ADDITIONS/CHANGES:**

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

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: JARROD SIMMONS

MGRM

05/01/2003

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