2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000022275



FILED Aug 26, 2003 8:00 am Secretary of State 08-26-2003 90010 012 ****55.00

KENNEDY -	FORT MYERS LC	.4				08-20-2003 5	,0010 012	2 **** 33	.00
Principal Place of Business OF WEST HILLSBORO BOULEVARD SUITE 101 DEERFIELD BEACH FL 33441 JS		Mailing Address 600 WEST HILLSBORO BOULEVARD SUITE 101 DEERFIELD BEACH FL 33441 US				I ARRINDU DIA KOKA MAN OSIA DEKI	1911) 66 11 5 (1 6 11	1 15050 15 0 56 1 1	11: 1 2: (15)
2. Principal Pla	ace of Business	3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. Fi	El Number 54 - 2069981			pplied For ot Applicable
Zip Country		Zip	Zip Coun		5. Certificate of Status Desired S \$5.00 Addition Fee Required				
	6. Name and Address of Curren	Registered Agent			7N	ame and Address of New Ro	gistered A	gent	
				Name					
	tman, robert j /est hillsboro boulevard 101			Street Address (P.O. Box Number is Not Acceptable)					
	FIELD BEACH FL 33441	·		č				T = 0	
		•		City	FL Zip Code				ie
AD MESS TO LE	Salanga Para Bangi Pangangan	FILE NOW!!! FEE IS \$50.00 Make Check Payable to Florida Departmen Due By September 24, 2003			artment of S	State			
9.	MANAGING MEMB	ERS/MANAGERS	10.			ADDITIONS/	CHANGES		
TITLE	*	☐ Delete	TITLE		Preside	nt		☐ Change	XX Addition
NAME STREET ADDRESS CITY-ST-ZIP		_		ET ADDRESS ST-ZIP	Robert 600 Wes	J. Trautman t Hillsboro Blv ld Beach, FL 3	d Suite 3441	e 101	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Secreta Robert 600 Wes Deerfie	ry Kannad N. Kennedy t Hillsboro Blvd ld Beach, FL 334	d Suite	□ Change e 101	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			James R 600 West	r of Finance . Hills t Hillsboro Blýo ld Beach, FL 334	l Suite		XX Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete						Change	☐ Addition
TITLE . NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		ľ				☐ Change	☐ Addition
TITLE NAME		☐ Delete	TITLE NAME	ſ				☐ 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 redever or trustee empowered to execute this report is required by Chapter 608, Florida Statutes.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED BY NAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

954-426-9999 Daytime Phone #