

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000024260

FILED
Jan 28, 2003
Secretary of State

Entity Name: COMMONWEALTH WENCO, LLC

Current Principal Place of Business:

7027 COMMONWEALTH AVE.
JACKSONVILLE, FL 32254

New Principal Place of Business:

7027 COMMONWEALTH AVE.
JACKSONVILLE, FL 32220

Current Mailing Address:

12276 SAN JOSE BLVD.
SUITE 121
JACKSONVILLE, FL 32223

New Mailing Address:

FEI Number: 55-0797971 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBSON, LEE ANNE
12276 SAN JOSE BLVD.
SUITE 121
JACKSONVILLE, FL 32223

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: DOBSON, LEE ANNE W
Address: 12276 SAN JOSE BLVD, STE 121
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: MGRM () Change (X) Addition
Name: DOBSON, JOHN M JR
Address: 12276 SAN JOSE BLVD, STE 121
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: MGRM () Change (X) Addition
Name: WRAY, ANDREW M IV
Address: 12276 SAN JOSE BLVD, STE 121
City-St-Zip: JACKSONVILLE, FL 32223 US

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: LEE ANNE DOBSON

MGRM

01/28/2003

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