

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000024602

FILED
Feb 04, 2003
Secretary of State

Entity Name: MR. WIGGLER LLC

Current Principal Place of Business:

1184 COUNTRYWIND DRIVE
APOPKA, FL 32703

New Principal Place of Business:

Current Mailing Address:

1184 COUNTRYWIND DRIVE
APOPKA, FL 32703

New Mailing Address:

FEI Number: 75-3086143

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARNOLD, MATHENY & EAGAN, P.A.
801 N. MAGNOLIA AVE.
SUITE 201
ORLANDO, FL 32802 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: () Delete
Name:
Address:
City-St-Zip:

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

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: LARSON, DAVID J MANAGER
Address: 1184 COUNTRYWIND DR.
City-St-Zip: APOPKA, FL 32703 US

Title: MGR () Change (X) Addition
Name: CHIPMAN, JIMMY D MANAGER
Address: 410 E. WELCH ROAD
City-St-Zip: APOPKA, FL 32712 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: DAVID J. LARSON

MGR.

02/04/2003

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