

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90230 001 ****50.00

DOCUMENT # L02000025237

1. Entity Name

INFLOWSON, L.L.C.



Principal Place of Business

320 CYPRESS ROAD
OCALA FL 34472-3102

Mailing Address

320 CYPRESS ROAD
OCALA FL 34472-3102

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

33-1029091

Applied For

Not Applicable

5. Certificate of Status Desired

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, MARTY
101 SOUTHWEST THIRD STREET
OCALA FL 34474

7. Name and Address of New Registered Agent

Name
Deborah J. Murdock
Street Address (P.O. Box Number is Not Acceptable)
14344 SE 131st Pl.
Ocklawaha
City FL Zip Code
32179

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 Deborah J. Murdock - Deborah J. Murdock

4-18-03
DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE Managing Member-Mgr ☐ Delete
NAME Kiles, J. Kevin
STREET ADDRESS 701 SE 43rd Ave.
CITY-ST-ZIP Ocala, FL 34471

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Managing Member-Mgr ☐ Delete
NAME Murdock, Michael L.
STREET ADDRESS 14344 SE 131st Pl
CITY-ST-ZIP Ocklawaha, FL 32179

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Michael L. Murdock

4-18-03

352/680-3555

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

Date

Daytime Phone #

0064192

CR2E083 (10/02)