

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L02000033237

FILED
Feb 13, 2003
Secretary of State

Entity Name: THE METTE/TREFRY GROUP LLC

Current Principal Place of Business:

8669 COMMODITY CIRCLE #102
ORLANDO, FL 32819

New Principal Place of Business:

5401 S KIRKMAN RD
400
ORLANDO, FL 32819

Current Mailing Address:

8669 COMMODITY CIRCLE #102
ORLANDO, FL 32819

New Mailing Address:

5401 S KIRKMAN RD
400
ORLANDO, FL 32819

FEI Number: 05-0545109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METTE, KENNETH C
8669 COMMODITY CIRCLE #102
ORLANDO, FL 32819

Name and Address of New Registered Agent:

METTE, KENNETH C
5401 S KIRKMAN RD
400
ORLANDO, FL 32819

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: KENNETH C METTE

02/13/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: METTE, KENNETH C
Address: 8669 COMMODITY CIRCLE #102
City-St-Zip: ORLANDO, FL 32819

Title: MGRM () Delete
Name: TREFRY, EARL C JR
Address: 1301 RIVERPLACE BLVD. #2201
City-St-Zip: JACKSONVILLE, FL 32207

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: METTE, KENNETH C
Address: 5401 S KIRKMAN RD STE 400
City-St-Zip: ORLANDO, FL 32819

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: KENNETH C METTE

MGRM

02/13/2003

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