2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (URB)

FILED Apr 30, 2003 8:00 am Secretary of State

DOUGLAS WOODS, LLC	DOCUME		0033921					04-30-2	003 90	0192 0	30 ****50.00
Principal Place of Business 1464 Palm Beach, Lakes Blvd. Suite 1200 West Palm Beach, FL 33401 Z. Principal Place of Business Suite, Apt. #, int. Suite, A	1. Entity Name		ODS H.C								
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6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 8. Street Address (P.O. Box Nambor is Not Acceptable) 6. 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, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept th	City & State		City & State			1	FEI Number	36-451	17855	,	Not Applicable
Name and Address of Current Registered Agent Lioce, Domenick R. 1645 Palm Beach Lakes Bivd.; Suite 1200 West Palm Beach, Florida 33401 The above mand edity suites this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. FILE NOW!!! FEE IS \$50.00 Make Check Pay 2003 ***MANAGING MEMBERS/MEMBERS** ***MANAGING MEMBERS/MEMBERS** ***MANAGING MEMBERS/MEMBERS** ***MANAGING MEMBERS/MEMBERS** ***MEET ADDRESS** ***Green Address of New Registered Agent in Not Acceptable) ***Due By May 1, 2003 ***ADDITIONS/CHANGES** ***TREET ADDRESS** CITY-ST-ZIP** ***TREET ADDRESS** CITY-ST-ZIP*	Zip	Country	Zip	Countr	ÿ	5.	Certificate of	Status Desire	. []	\$5.00 Additional
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Make Check Payable to Department of State Due By May 1, 2003 9. MANAGING MEMBERS/MEMBERS 10. ADDITIONS/CHANGES TITLE Manage NAME Lioce, Domenick R. 1645 Palm Beach Lakes Blvd., #1200 West Palm Beach, Florida 33401 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ST		re, typed or printed name of registered agent end titl	e if applicable	(Note: registere	d Agent signature required when i	reinstating)		· · · · · · · · · · · · · · · · · · ·	DATE	, ·	
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13. 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		tify that the information supplies	d with this filing does no	3		Section 110	07(3\/I) Ela	rida Statutos	i further	Cocific	hat the information
7.7.7. AND TOTAL COMPANIES HOUSE MANAGEMENT AND			GNING MANAGING MEN	DOMENICK R	. Lioce, Mana	eer		Αr	ril 24	.2003	561 - 686-3307