2000	UNIFORM	<b>BUSINESS</b>	REPORT (	(UBR
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2000	UNIFORM I	BUSINESS REPO	ORT (U	UBR)	" 1	APPROVED AND FILED			יייטטערייאט
DOCU 1. Entity Nam	MENT# L9	3000000398				•	0.15		Č
CREEKSI						00 APR -3 AM 9			_
						SECRETARY OF S	TATE ORIDA		
Principal Plac	e of Business	Mailing Address				MALLANASSELFIC	OMBre		
535 PARK AVI	E. N.	P.O. BOX 1508 WINTER PARK FL 32790	L1508		٠.	mf4/1	8		
WINTER PARK FL 32/90-15 WINTER PARK FL 32/90-15 US				11	• (1	•	*8.81 (81) ( <b>66</b> )		
2. Principal P	Place of Business	3. Mailing Address			-				
Suite, Apt.		Suite, Apt. #, etc.				DO NOT WRITE IN	THIS SDACE		
					DO NOT WRITE IN THIS SPACE				7
City & Stat	re	City & State	City & State		4. FEI Nu	59-3230505	No	oplied For ot Applicable	
Zip 	Country	Zip	Country		5. Certific	cate of Status Desired	\$5.00 Add Fee Require		
- N.L.	6. Name and Address of	Current Registered Agent		Name	7. Name	and Address of New Registe	ered Agent		
WILLIAMS	, WARREN E		s	Street Address (	P.O. Box Nu	mber is Not Acceptable)			
	CENTRAL BOULEVARD		1						
OHLANDIC	) FL 32801				·		FL Zip Cod		┨.
8. The above	e named entity submits this sta	stement for the purpose of changing it	s registered o	office or register	red agent, or				
	,		J	ū					
SIGNATURE	Signature, typed or printed name of regis	stered agent and title if applicable. (NO	TE: Registered Ag	ent signature required	d when reinstating	))	ATE		
		FILE N Make Check P		E IS \$50.00 Department o	f State				
9.		IG MEMBERS/MEMBERS	10.	·			659 1 <u>3 3</u>	4	] [6
TITLE NAME	MGR WILLIAMS, WARREN E	☐ Delete	TITLE			-U4/2U/U( ****5D。	]——[][ <b>] [Biblio</b> e— [][]  *****	-0 <b>.00</b>	1 50
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NAME STREET ADDRESS			STREET A						
STREET ADDRESS CITY-ST-ZIP 11.   hereby c	certify that the information sup	plied with this filing does not qualify fo	STREET AVECTOR THE EXEMPT	tion stated in Se	ection 119.07	7(3)(i), Florida Statutes. I furth	er certify that the i	nformation	
STREET ADDRESS CITY-ST-ZIP  11. I hereby condicated	certify that the information sup I on this report is true and acci ability company or the receive	pplied with this filing does not qualify fourage and that my signature shall have true to see a constant of the second to seco	STREET AVECTOR THE EXEMPT	tion stated in Se	ection 119.07 nade under ter 608, Flori	7(3)(i), Florida Statutes. I furtho path; that I am a managing m da Statutes.	er certify that the intermediate in the interm	nformation er of the	
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