

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L98000002365

FILED  
Apr 29, 2002 8:00 AM  
Secretary of State

**Entity Name:** CHILDERS ENTERPRISES OF INDIA, L.L.C.

**Current Principal Place of Business:**

7005 SHANNON WILLOW ROAD  
CHARLOTTE, NC 28226

**New Principal Place of Business:**

1518 PROVIDENCE ROAD  
CHARLOTTE, NC 28207

**Current Mailing Address:**

7005 SHANNON WILLOW ROAD  
CHARLOTTE, NC 28226

**New Mailing Address:**

1518 PROVIDENCE ROAD  
CHARLOTTE, NC 28207

**FEI Number:** 56-2110174

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHILDERS, JOANN S  
1074 SPANISH RIVER ROAC  
BOCA RATON, FL 33432 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: MGR ( ) Delete  
Name: CHILDERS, BILL S  
Address: 50 ISLAND DRIVE  
City-St-Zip: KEY LARGO, FL 33037

Title: MGR ( ) Delete  
Name: CHILDERS, JOANN S  
Address: 1074 SPANISH RIVER ROAD  
City-St-Zip: BOCA RATON, FL 33432

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: CHILDERS, BILL S  
Address: 98 BRAYS ISLAND DRIVE  
City-St-Zip: SHELDON, SC 29941

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: JOANN S CHILDERS

MGR

04/29/2002

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