

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

04-01-2002 90607 004 ****50.00

DOCUMENT # L98000002372

1. Entity Name

PORTFOLIO RESOURCES, L.L.C.

Principal Place of Business

% BARRY HENRY
 6420 SOUTHPOINT PARKWAY
 JACKSONVILLE FL 32216

Mailing Address

% BARRY HENRY
 6420 SOUTHPOINT PARKWAY
 JACKSONVILLE FL 32216

B0054697

2. Principal Place of Business

6430 SOUTHPOINT PARKWAY

3. Mailing Address

6430 SOUTHPOINT PARKWAY

Suite, Apt. #, etc.

SUITE 140

Suite, Apt. #, etc.

SUITE 140, % BARRY HENRY

DO NOT WRITE IN THIS SPACE

City & State

JACKSONVILLE, FL

City & State

JACKSONVILLE, FL

4. FEI Number

59-3538129

Applied For

Not Applicable

Zip

32216

Country

USA

Zip

32216

Country

USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HENRY, BARRY K
 6420 SPOUTHPOINT PARKWAY
 JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name

HENRY, BARRY K.

Street Address (P.O. Box Number is Not Acceptable)

6430 SOUTHPOINT PARKWAY, SUITE 140

City

JACKSONVILLE

FL

Zip Code

32216

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.

SIGNATURE

Barry K Henry, BARRY K. HENRY, CFO

3/19/02

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
 NAME GRAHAM, DAVID G ☐ Delete
 STREET ADDRESS 6420 SPOUTHPOINT PARKWAY
 CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE MGR
 NAME COLLIER, CLAUDE W JR. ☐ Delete
 STREET ADDRESS 6420 SPOUTHPOINT PARKWAY
 CITY-ST-ZIP JACKSONVILLE FL 32216

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition
 NAME GRAHAM, DAVID G.
 STREET ADDRESS 6430 SOUTHPOINT PARKWAY, SUITE 140
 CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE MGR ☒ Change ☐ Addition
 NAME COLLIER, CLAUDE W. JR.
 STREET ADDRESS 6430 SOUTHPOINT PARKWAY, SUITE 140
 CITY-ST-ZIP JACKSONVILLE, FL 32216

TITLE CFO ☐ Change ☒ Addition
 NAME HENRY, BARRY K.
 STREET ADDRESS 6430 SOUTHPOINT PARKWAY, SUITE 140
 CITY-ST-ZIP JACKSONVILLE, FL 32216

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

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

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:

Barry K Henry, BARRY K. HENRY 3/19/02 904-281-4259

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

Date

Daytime Phone #

CR2E083 (9/01)