

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 APR 24 PM 12:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L98000002425

1. Entity Name
GLOBAL ORDNANCE, L.L.C.

Principal Place of Business
10101 - 9th Street North
St. Petersburg, FL 33716

Mailing Address
10101 - 9th Street North
St. Petersburg, FL 33716

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3542126

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

John W. Hudkins
10101 - 9th Street North
St. Petersburg, FL 33716

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **Zip Code**

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  **John W. Hudkins** **4/5/00**
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

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-05/09/00--01097--003
*****50.00 *****50.00

9. MANAGING MEMBERS / MEMBERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
Manager	John E. Fischer	10101 - 9th Street North	St. Petersburg, FL 33716	<input type="checkbox"/>
Manager	Ehud Frank	64 Bialik Blvd	Ramat-Hasharon, Israel	<input type="checkbox"/>
Manager	Zippora Gur-Aire	7910 Woodmont Avenue #141	Bethesda, MD	<input type="checkbox"/>
Manager	John W. Hudkins	10101 - 9th Street North	St. Petersburg, FL 33716	<input type="checkbox"/>
Manager	Michael S. Wilson	10101 - 9th Street North	St. Petersburg, FL 33716	<input type="checkbox"/>
Manager	Avinoam Zafir	64 Bialik Blvd	Ramat-Hasharon, Israel	<input type="checkbox"/>

10. ADDITIONS / CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

11. I hereby certify that the information provided in 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:  **John W. Hudkins**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER **Date** **Daytime Phone #**

CR2E083 (11/99)