

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L98000002668

FILED  
May 01, 2002 8:00 AM  
Secretary of State

**Entity Name:** FLORIDA GROWTH CAPITAL, L.L.C.

**Current Principal Place of Business:**

8714 PISA DRIVE, SUITE 813  
ORLANDO, FL 328102160

**New Principal Place of Business:**

**Current Mailing Address:**

8714 PISA DRIVE, SUITE 813  
ORLANDO, FL 328102160

**New Mailing Address:**

**FEI Number:** 59-3541281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKLIN, DAVID G  
8714 PISA DRIVE, SUITE 813  
ORLANDO, FL 328102160 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:** MGRM ( ) Delete  
**Name:** FRANKLIN, DAVID G  
**Address:** 8714 PISA DRIVE, SUITE 813  
**City-St-Zip:** ORLANDO, FL 328102160

**Title:** MGRM ( ) Delete  
**Name:** MADDOX, LARRY C  
**Address:** 6602 WEST 131ST STREET  
**City-St-Zip:** OVERLAND PARK, KS 66209

**ADDITIONS/CHANGES:**

**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

**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:** DAVID G. FRANKLIN

MGRM

05/01/2002

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