

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L99000000197

FILED
Feb 25, 2003
Secretary of State

Entity Name: FLORIDA FOOD SERVICE SPECIALISTS, LC

Current Principal Place of Business:

4487 C AND D ASHTON ROAD
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

4487 C AND D ASHTON ROAD
SARASOTA, FL 34233

New Mailing Address:

FEI Number: 65-0886248

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NORMAN, TODD W
4487-D ASHTON RD.
SARASOTA, FL 34233 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: P () Delete
Name: TODD, NORMAN
Address: 332 BAYSHORE DRIVE
City-St-Zip: OSPREY, FL 34299

Title: MGRM () Delete
Name: PLOUTZ, STEVEN
Address: 2236 RIVER RIDGE RD.
City-St-Zip: DELAND, FL 32720

Title: MGRM () Delete
Name: TODD, VICTORIA
Address: 332 BAYSHORE DR.
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: TODD, NORMAN
Address: 332 BAYSHORE DRIVE
City-St-Zip: OSPREY, FL 34299

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: STEVEN PLOUTZ

MGRM

02/25/2003

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