2000 UNIFORM BUSINESS REPORT (UBR)

000179965 SP

DOCUMENT # L99000000360

1. Entity Name

MORGAN DOUGLAS ENTERPRISES, L.C.

FILED

00 APR 11 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
4848 OLD US 41. SUITE 14 NAPLES FL 34110	4848 OLD US 41. SUITE 14 NAPLES FL 34110

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
14848 OLD US 41	14848 OLD US 41
Suite, Apt. #, etc. SUITE 14	Suite, Apt. #, etc. SUITE 14
City & State NAPLES FL	City & State NAPLES FL
Zip 34110 Country	Zip 34110 Country

4. FEI Number 593558825 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
VAN DIEN, PIETER G ESQ. 3550 E. TAMIAMI TRAIL NAPLES FL 34110	Name SCOTT D. HUNTER Street Address (P.O. Box Number is Not Acceptable) 11823 NIGHT HERON DRIVE City NAPLES **FL** Zip Code 34119

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 Scott D. Hunter SCOTT D. HUNTER Scott D. Hunter 4/7/00
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

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HUNTER, SCOTT D 11823 NIGHT HERON DRIVE NAPLES FL 34119 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HUNTER, LESLIE N 11823 NIGHT HERON DRIVE NAPLES FL 34119 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 300003217803--7 -04/21/00--01008--002 *****55.00 *****55.00
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HUNTER, SCOTT D II 11823 NIGHT HERON DRIVE NAPLES FL 34119 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM HUNTER, TRACY M 11823 NIGHT HERON DRIVE NAPLES FL 34119 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (9/99)

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: Scott D. Hunter SCOTT D. HUNTER 4/7/00 (941)594-8091
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER — Date — Daytime Phone #