2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #   L99000001070

1. Entity Name

SILVER CROSSING, L.L.C.

Principal Place of Business	Mailing Address
200 PASADENA PLACE ORLANDO FL 32803	200 PASADENA PLACE ORLANDO FL 32803-3828

2. Principal Place of Business	3. Mailing Address	DO NOT WRITE IN THIS SPACE
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	4. FEI Number · ☑ Applied For / Not Applicable
Zip · Country	Zip · Country	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
BRANDON, STEPHEN E 200 PASADENA PLACE ORLANDO FL	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 _____

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 MGR **NAME** HAPPY FAMILY, INC. **STREET ADDRESS** 200 PASADENA PLACE **CITY-ST-ZIP** ORLANDO FL ☐ Delete	**TITLE** **NAME** **STREET ADDRESS** **CITY-ST-ZIP** 6000031825T6 ☐ Change ☐ Addition -03/24/00--01043--006 *****50.00 *****50.00
TITLE **NAME** **STREET ADDRESS** **CITY-ST-ZIP** ☐ 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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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: SIGNATURE REQUIRED Brendan Stephen Brandon   2/28/00   407-835-9000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER   Date   Daytime Phone #