## **2000 UNIFORM BUSINESS REPORT (UBR)**

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DOCUMENT # L9900003735  1. Entity Name DIRKSE FLORIDA GROUP, L.C.							SEC DIVISIO	FIL RETAR IN OF O	_ED Y 0F ST CORPORA	ATE ATIONS
Principal Plac	ee of Business	Mailing Address			_		00 FE	B-1	PH 4:	18
2402 CLARK ST 2402 CLARK ST APOPKA FL 32703 APOPKA FL 32703-2109										
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2. Principal P	Place of Business	3. Mailing Address			_					
		Suite, Apt, #, etc.	uite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
					A FEIN					oplied For
City & Stat	e	City & State			4. FEI Nu	-359 i	431	1	No	ot Applicable
Zip	Country	Zip	Counti	ry	5. Certific	ate of Status De	esired		<b>55.00</b> Addice Require	
	6. Name and Address of Cur	rent Registered Agent		Name	7. Name	and Address o	New Regis	stered Ag	gent	
MOORE, BRIAN W 2402 CLARK ST			-=		s (P.O. Box Nu	mber is Not Acc	eptable)			
			Street Addres							
apopka i	FL 32/03		-	City				FL	Zip Cod	e
					·—				<u> </u>	
8. The above	named entity submits this stateme	ent for the purpose of changing it	ts registere	d office or regis	tered agent, or	both, in the Sta	te of Florida	1.		i
8. The above	e named entity submits this statement of registered signature, typed or printed name of registered	agent and title if applicable. (NC	TE: Registered	Agent signature requ	iired when reinstating		te of Florida	DATE		
		agent and title if applicable. (NC	OTE: Registered	Agent signature requ	ired when reinstating	)		DATE		
SIGNATURE .	Signature, typed or printed name of registered MANAGING MI	agent and title if applicable. (NC FILE N Make Check P	NOW!!! F Payable to	Agent signature requirements	ired when reinstating	)	te of Florida	DATE ANGES	Change	Addition
SIGNATURE .	Signature, typed or printed name of registered	agent and title if applicable. (NO FILE N Make Check P	NOW!!! Fayable to	Agent signature requirement	of State	ADD 1000!	TIONS/CH	ANGES	□ Change 0.55:9- 045-0 \$4***	T. "
9. TITLE NAME STREET ADDRESS	MANAGING MI MGRM DIRKSE LAND DEVELOPMEN 1244 WAUKAZOO DRIVE HOLLAND MI 49424 MGRM WIRETEC IGNITION, INC.	agent and title if applicable. (NO FILE N Make Check P	NOW!!! F Payable to  10.  TITLE NAME STREE CITY- TITLE NAME	Agent signature requirement  EE IS \$50.0  Department	of State	ADD 1000!	TIONS/CH	ANGES01	)59- 0450	- <b>-9</b>
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MI MGRM DIRKSE LAND DEVELOPMEN 1244 WAUKAZOO DRIVE HOLLAND MI 49424 MGRM	EMBERS/MEMBERS  T, L.L.C.	NOW!!! F Payable to  10. TITLE NAME STREE CITY- TITLE NAME STREE CITY-	Agent signature requirement  EE IS \$50.0  Department  ET ADDRESS  \$1-ZIP	of State	ADD 1000!	TIONS/CH	ANGES 011	0450 ******	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	MANAGING MI MGRM DIRKSE LAND DEVELOPMEN 1244 WAUKAZOO DRIVE HOLLAND MI 49424 MGRM WIRETEC IGNITION, INC. 2402 CLARK STREET	EMBERS/MEMBERS  Detste	NOW!!! F Payable to  10. TITLE NAME STREE CITY- TITLE HAME STREE CITY- TITLE TITLE TITLE NAME	Agent signature requirement TEE IS \$50.0 Department TADDRESS ST-ZIP TADDRESS ST-ZIP	of State	ADD 1000!	TIONS/CH	ANGES 011	0450 ******	- <b>-9</b>
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407578-4569

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

100\_\_\_\_

Daytime Phone #