

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000004287

1. Entity Name  
SODIX MONROE, L.L.C.

APPROVED  
AND  
FILED

00 MAY -2 PM 3:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
3501 S.W. CORPORATE PARKWAY  
PALM CITY FL 34990

Mailing Address  
3501 S.W. CORPORATE PARKWAY  
PALM CITY FL 34990-8150

2. Principal Place of Business  
3398 PGA BLVD.  
Suite, Apt. #, etc.  
Ste # 450  
City & State  
Palm Beach Gardens, FL  
Zip  
33410  
Country  
USA

3. Mailing Address  
3398 PGA BLVD.  
Suite, Apt. #, etc.  
Suite 450  
City & State  
Palm Beach Gardens, FL  
Zip  
33410  
Country  
USA

4. FEI Number  
65-0933722  
Applied For  
Not Applicable

5. Certificate of Status Desired  
\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
PETER D. CUMMINGS & ASSOCIATES, INC.  
3501 S.W. CORPORATE PARKWAY  
PALM CITY FL 34990

7. Name and Address of New Registered Agent  
Name  
Peter D. Cummings & Associates, Inc.  
Street Address (P.O. Box Number is Not Acceptable)  
3398 PGA BLVD.  
Suite 450  
City  
Palm Beach Gardens, FL  
Zip Code  
33410

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] David A. Dean, Vice President  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  
DATE  
4/25/00

FILE NOW!!! FEE IS \$50.00  
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
MGR	CUMMINGS, PETER D	3501 S.W. CORPORATE PARKWAY	PALM CITY FL 34990	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Delete

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
MGR	Cummings, Peter D.	3398 PGA BLVD. Ste 450	Palm Beach Gardens, FL 33410	<input checked="" type="checkbox"/>	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	Change	Addition

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] Peter D. Cummings  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER  
Date  
4/25/00 (561) 630-6110  
Daytime Phone #

CR2E083 (9/99)