

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000004326

1. Entity Name

KHRI, L.C.

Principal Place of Business

711 E OAKRIDGE ROAD  
ORLANDO FL 32839

Mailing Address

711 E OAKRIDGE ROAD  
ORLANDO FL 32809-4204

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

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

PUGH, RICHARD D  
711 E OAKRIDGE ROAD  
ORLANDO FL 32839

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  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
MGR  
PUGH, RICHARD D  
711 E OAKRIDGE ROAD  
ORLANDO FL 32839

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
200003119772--4  
-02/01/00--01638-025  
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☐ Change ☐ Addition

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☐ 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 Required*

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

Date

Daytime Phone #

1-25-00

407  
857-1209



DO NOT WRITE IN THIS SPACE

FILED  
00 JAN 27 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CR2E083 (9/99)