FILED
May 19, 2003 8:00 am
Secretary of State

05-19-2003 90070 007 ****50.00

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

10105286

DOCUMENT # L99000005083

1. Entity Name
DENOON & COMPANY, L.L.C.

Principal Place of Business	Mailing Address
1400 BRIERCLIFF DRIVE ORLANDO, FL 32806-1408	1400 BRIERCLIFF DRIVE ORLANDO, FL 32806-1408
2. Principal Place of Business: 1109 Elysium Blvd	3. Mailing Address: 1109 Elysium Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Mount Dora, FL	City & State: Mount Dora, FL
Zip: 32757 Country	Zip: 32757 Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 11-0424946 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent

KELLEY, MARC W
1400 BRIERCLIFF DRIVE
ORLANDO, FL 32806

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable): 1109 Elysium Blvd

City: Mount Dora FL Zip Code: 32757

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Marc W. Kelley
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 Checks Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE	MGR	☐ Delete	TITLE		☐ Change ☐ Addition
NAME	KELLEY, MARC W		NAME		
STREET ADDRESS	1400 BRIERCLIFF DRIVE		STREET ADDRESS		
CITY-ST-ZIP	ORLANDO, FL 328061408		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

CR2E083 (10/02)

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: Marc W. Kelley — 5/14/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #