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Mar 03, 2003 8:00 am
Secretary of State

2/5/ 02-05-2003 90030 047 ****30.00
03-03-2003 90009 001 ****25.00

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2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000005970

1. Entity Name
LLOYD, BENTON & TAYLOR, LLC

Principal Place of Business	Mailing Address
6630 CHESWICK STREET SARASOTA FL 34243	6630 CHESWICK STREET SARASOTA FL 34243

☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
110 E. BROWARD BLVD.	110 E. BROWARD BLVD.
Suite, Apt. #, etc.: 1700	Suite, Apt. #, etc.: 1700
City & State: FT. LAUDERDALE, FL	City & State: FT LAUDERDALE, FL
Zip: 33301 Country: U.S	Zip: 33301 Country: U.S

4. FEI Number 65-0949694 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LLOYD-KIRK, RODERICK J
110 E. BROWARD BLVD., SUITE 1700
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

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

SIGNATURE ______ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE: MGRM NAME: LLOYD-KIRK, RODERICK J STREET ADDRESS: 6630 CHESWICK STREET CITY-ST-ZIP: SARASOTA FL 34243	☐ Delete	TITLE: MGRM NAME: LLOYD-KIRK, RODERICK STREET ADDRESS: 110 E. BROWARD BLVD., SUITE 1700, CITY-ST-ZIP: FORT LAUDERDALE, FL 33301	☒ Change ☐ Addition
TITLE: MGRM NAME: LLOYD-KIRK, JULIANA STREET ADDRESS: 6630 CHESWICK STREET CITY-ST-ZIP: SARASOTA FL 34243	☐ Delete	TITLE: MGRM NAME: LLOYD-KIRK, JULIANA STREET ADDRESS: 110 E. BROWARD BLVD, SUITE 1700 CITY-ST-ZIP: FORT LAUDERDALE FL 33301	☒ Change ☐ Addition
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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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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] SIGNATURE REQUIRED 1/29/03 (954) 366-5790
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone

CR2E083 (10/02)