

2002 UNIFORM BUSINESS REPORT (UBR)**FILED**
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90194 030 ****50.00

DOCUMENT # L99000006228

1. Entity Name

ENTOMOS, L.L.C.

Principal Place of Business

Mailing Address

**4445 SW 35TH TERRACE, #310
GAINESVILLE FL 32608****4445 SW 35TH TERRACE, #310
GAINESVILLE FL 32608**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3599412

Applied For

Not Applicable

Zip

Country

Zip

Country

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****WHITE, JAMES H
4445 SW 35TH TERRACE, #310
GAINESVILLE FL 32608**

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
Due By May 1, 2002****9. MANAGING MEMBERS/MANAGERS****10. ADDITIONS/CHANGES**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
MGR	BENBROOK, CHARLES M	5085 UPPER PACK RIVER ROAD	SAND POINT SD 83864	<input type="checkbox"/>
MGR	WHITE, JAMES H	4445 SW 35TH TERRACE, #310	GAINESVILLE FL 32608	<input type="checkbox"/>
MGRM	KERN, ALBERT D	320 BELLAIRE	DEL MAR CA 92014	<input type="checkbox"/>
MGRM	COCKSHUTT, TIMOTHY G	100 N TAMPA ST., SUITE 2410	TAMPA FL 33602	<input type="checkbox"/>
MGRM	GARRETT, TATE A	100 N TAMPA ST., SUITE 2410	TAMPA FL 33602	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
MGRM	Benbrook, Charles M.	5085 Upper Pack River Road	Sand Point, SC 83864	<input checked="" type="checkbox"/>	<input type="checkbox"/>
MGRM	White, James H.	4445 SW 35th Terrace #310	Gainesville, FL 32608	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
MGRM	Caulder, Jerry	16852 Circa del Norte	Rancho Santa Fe, CA 92067	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (9/01)