2001	UNIFORM	BUSINESS	REPORT	(UBR)
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	MENT # L9900 RRANO GROUP, L.L.C.	00007429		,			LED		
Principal Place of Business 2562 WEST INDIANTOWN RD 3458 Mailing Address 2562 WEST INDIANTOWN RD 3458 JUPITER FL 33458 JUPITER FL 33458			N RD			2001 APR 2 DIVISION OF TALLAHAS	CORPORA SEE FLOR	21 Tions Vida	
2. Principal Place of Business 1700 Ocean Way Suite, Apt. #, etc. 3. Mailing Address 1700 Ocean Way Suite, Apt. #, etc.			Way			DO N	OT WRITE IN TH	IIS SPACE	
City & Stat Jupit Zip	e er, FL Country	City & State Jupiter, Fi	L =	13 m	4. FE	Number 65-09	60778		Applied For Not Applicable
<u>33477</u>	USA_	33477	USA	. *		rtificate of Status De		Fee Requ	Additional uired
	6. Name and Address of Current	Registered Agent		Name	7. Nar	ne and Address of	New Registers	d Agent	
LEITTEN, SCOTT J 1001 N. U.S HWY ONE, STE 400 JUPITER FL 33477				Street Address (P.O. Box Number is Not Acceptable)					
JOI II LII	12 334//			City			F	Zip C	ode
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or re	gistered agent	, or both, in the Sta			
SIGNATURE .	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTI	E: Registered	Agent signature n	equired when reinst	ating)	DATE		
		FILE NO Make Check Pa		EE IS \$50 Departme					
9.	MANAGING MEMBE	RS/MEMBERS	10.			ADDI	TIONS/CHANG	ES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WEST SENECA NV 14224			T ADDRESS ST-ZIP			04085 1/27/01 ****50.00	01082	-005 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEANGELIS, DANIEL 2562 WEST INDIANTOWN ROAD JUPITER FL 33458	☐ Delete	NAME STREE	TADDRESS 1	1700 Oc	ean Way,	Jupite	XX Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DOUGHERTY, WILLIAM 2562 WEST INDIANTOWN ROAD JUPITER FL 33458	☐ Delete	TITLE NAME STREET CITY-S		700 Oc	ean Way,	Jupite	XX Change r, FL	i
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP				☐ Change	e ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET CITY-S	I ADDRESS ST-ZIP		·		☐ Change	Addition
www.aneo.c	ertify that the information supplied with on this report is true and accurate and to oility company or the engiver or trustee URE: SIGNATURE AND TYPED OR PRINTED NAME OF	nat my signature shall have the proposered to execute this responsered to execute this responsered to the signature of the si	ne same l eport as r Danie	legal effect a equired by C	s if made unde Chapter 608, FI	vroath: that I am a	managing mem	ertify that the ber or manag	0092