

2001 UNIFORM BUSINESS REPORT (UBR)

0028605 AF

DOCUMENT # L99000008326

1. Entity Name
PRECISE WEATHER CAPITAL, L.L.C.

FILED

01 MAR 19 PM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**THE RICE HOTEL, SUITE 1314
909 TEXAS AVENUE
HOUSTON TX 77002**

Mailing Address
**THE RICE HOTEL, SUITE 1314
909 TEXAS AVENUE
HOUSTON TX 77002**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2507013

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MITCHELL, STEPHEN J
SUITE 2200
ONE TAMPA CITY CENTER
TAMPA FL 33602**

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 _____ (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 Delete
**MGRM
MITCHELL, STEPHEN J JR
909 TEXAS AVENUE, SUITE 1314
HOUSTON TX 77002**

TITLE NAME Change Addition
**MGRM
Stephen J Mitchell SR
16311 Avila Blvd
TAMPA - FL - 33613**

TITLE NAME Delete
**MGR
Rod W Husk
8410 Old Band Lane
Houston TX - 77040**

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition
**700003911427-00
03/27/01-01028-005
*****50.00 *****50.00**

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

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

Stephen J Mitchell JR

Date

2-7-01

Daytime Phone #

(713) 228-8470

CR2E083 (11/00)