

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000009384

1. Entity Name

AMRICH, L.L.C.

FILED

01 OCT -1 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

2758 SANDWELL DR.
WINTER PARK FL 32792

Mailing Address

2758 SANDWELL DR.
WINTER PARK FL 32792

2. Principal Place of Business

1809 Precious Cir.

3. Mailing Address

1809 Precious Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Apopka FL

City & State

Apopka FL

4. FEI Number

59-3613959

Applied For

Not Applicable

Zip

Country

32712 USA

Zip

Country

32712 USA

5. Certificate of Status Desired

☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SORENSEN, RICHARD A
2758 SANDWELL DR.
WINTER PARK FL 32792

7. Name and Address of New Registered Agent

Name SORENSON, RICHARD A

Street Address (P.O. Box Number is Not Acceptable)

1809 Precious Circle

City

Apopka

FL

Zip Code

32712

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

Richard A Sorenson

Richard A Sorenson 9/24/2001

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 September 26, 2001

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME SORENSON, RICHARD A
STREET ADDRESS 2758 SANDWELL DRIVE
CITY-ST-ZIP WINTER PARK FL 32792

☐ Delete

10. ADDITIONS/CHANGES

TITLE MGR
NAME SORENSON, RICHARD A
STREET ADDRESS 1809 Precious Circle
CITY-ST-ZIP Apopka FL 32712

☐ Change

☐ Addition

TITLE
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☐ 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

Richard A Sorenson

9/24/2001

4074642007

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

Date

Daytime Phone #

CR2E083 (5/01)