

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90190 020 ****55.00

**2003 LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # M00000002445			
1. Entity Name GRAND ROYALE CONSOLIDATED, LLC			
Principal Place of Business 2519 MCMULLEN BOOTH RD., SUITE 510-270 CLEARWATER, FL 33761		Mailing Address 2519 MCMULLEN BOOTH RD., SUITE 510-270 CLEARWATER, FL 33761	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3680937		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☒		5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent TRUESDALE, RICHARD S 9 VILLA COURT SAFETY HARBOR, FL 34696			
7. Name and Address of New Registered Agent Name ARLINGTON TRUST COMPANY Street Address (P.O. Box Number is Not Acceptable) 2519 MCMULLEN BOOTH RD. SUITE 510-270 City CLEARWATER FL Zip Code 33761			
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 <i>Ted Carter</i> Signature, typed or printed name of registered agent (not applicable)		NOTE: Registered Agent signature required when electing to change agent. TED CARTER DATE 4/23/03	
9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TRUESDALE, RICHARD S 2519 MCMULLEN BOOTH RD., SUITE 510-270 CLEARWATER, FL 33761 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TED CARTER 2519 MCMULLEN BOOTH RD, SUITE 510-270 CLEARWATER, FL 33761 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COOPER, TORREY K 2519 MCMULLEN BOOTH RD., SUITE 510-270 CLEARWATER, FL 33761 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COOPER, HOWARD M 2519 MCMULLEN BOOTH RD., SUITE 510-270 CLEARWATER, FL 33761 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEONETTI, JR., FRANK 2519 MCMULLEN BOOTH RD., SUITE 510-270 CLEARWATER, FL 33761 ☒ 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
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)(g), 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 806, Florida Statutes.			
SIGNATURE: <i>Ted Carter</i> SIGNATURE AND TYPED OR PRINTED NAMES OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE		4/23/03 (727) 480-0989 Date Daytime Phone #	
TED CARTER			

30063981



☒ CHECK HERE IF MAKING CHANGES

CRE083 (10/02)