

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****May 11, 2001 08:00 AM**
Secretary of State**DOCUMENT # M00000002651****1. Entity Name**
YORK OUTDOOR, LLC**Principal Place of Business**

112 SHEFFIELD LOOP, STE D

HATTIESBURG
39402

MS

Mailing Address

112 SHEFFIELD LOOP, STE D

HATTIESBURG
39402

MS

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**64-0914831**

Applied For

Not Applicable

5. Certificate of Status Desired**\$5.00** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentC T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROADPLANTATION
33324

US

FL

7. Name and Address of New Registered Agent

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)

05/11/2001

DATE

FILE NOW!!! FEE IS \$50.00**Make Check Payable to Department of State****9. MANAGING MEMBERS / MEMBERS****10. ADDITIONS / CHANGES**

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	HAMMOND JAN W	
STREET ADDRESS	112 SHEFFIELD LOOP STE D	
CITY-ST-ZIP	HATTIESBURG MS	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	CAROTHERS EUGENE D	
STREET ADDRESS	112 SHEFFIELD LOOP STE D	
CITY-ST-ZIP	HATTIESBURG MS	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	YORK JOHN T	
STREET ADDRESS	112 SHEFFIELD LOOP STE D	
CITY-ST-ZIP	HATTIESBURG MS	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	YORK-LOSEE PAIGE	
STREET ADDRESS	112 SHEFFIELD LOOP STE D	
CITY-ST-ZIP	HATTIESBURG MS	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	YORK JR BENNETT V	
STREET ADDRESS	112 SHEFFIELD LOOP STE D	
CITY-ST-ZIP	HATTIESBURG MS	
TITLE	MGRM	<input type="checkbox"/> Delete
NAME	YORK BENNETT V	
STREET ADDRESS	112 SHEFFIELD LOOP STE D	
CITY-ST-ZIP	HATTIESBURG MS	

TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	HATTIESBURG MS 39402	
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CITY-ST-ZIP	HATTIESBURG MS 39402	

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:** Paige York-Losee

mgrm

05/11/2001

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

Date

Daytime Phone #

CR2E083 (11/00)