## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # M0100000325

LUXURY HOME LINKS, LLC

## FILED Jul 02, 2002 8:00 am Secretary of State 07-02-2002 90818 021 \*\*\*\*50.00

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Suite, Apt. #, etc.  Suite, Apt. #, etc.  City Summer is Not Acceptable)  Screet Address of Current Registered Agent  MCKENZE, LINDA  343 SO. WASHINGTON DR.  SARASOTA FL  Title  MGR  MGR  MCKENZE, LINDA  MANAGING MEMBERS / MANAGERS  FILE NOW!!! FEE S \$50.00  Make Check Payable to Department of State Delete  Title  MCKENZE, LINDA  MRS.  MANAGING MEMBERS / MANAGERS  Title  MCKENZE, LINDA  MGR  MCKENZE, LINDA  MGR  MCKENZE, LINDA  MGR  MCKENZE, LINDA  MCKENZE, LINDA  PO BOX 208  STRET ACCESS  DOT-57-29  TITLE  MANAGING MEMBERS / MANAGERS  MANAGING MEMBERS / MANAGERS  MILE  MILE			208							
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6. Name and Address of Current Registered Agant  7. Name and Address of New Registered Agant  7. Name and Address of New Registered Agant  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida.  8. The above named entity submi	Sarasota City & State  City &			ta .	4. FEI NO	<sup>umber</sup> <b>59-033227</b>	7		· ·	]
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MCKENZE, LINDA 343 SO. WASHINGTON DR. SARASOTA FL 34:288    City   FL   Zip Code		6. Name and Address of Current	Registered Agent	Name	7. Name	and Address of New Re	egistered Ac	jent		-
Street Address (P.O. Box Number is Not Acceptable)    City   FL   Zip Code	MCI									
8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida.    SIGNATURE	343	Street Address	Street Address (P.O. Box Number is Not Acceptable)							
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