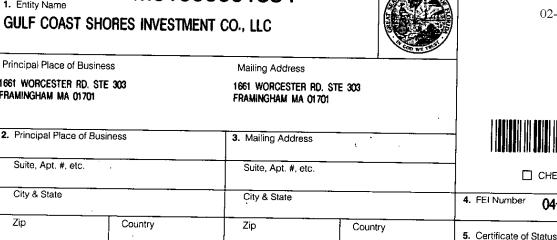
2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M01000001384



FILED Feb 05, 2003 8:00 am Secretary of State 02-05-2003 90027 042 ****55.00

Principal Place of Business 1661 WORCESTER RD. STE 303 FRAMINGHAM MA 01701 Mailing Address 1661 WORCESTER RD. STE 303 FRAMINGHAM MA 01701 FRAMINGHAM MA 01701		4			
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	FRANKICIAM AND GENERAL COMMISSION OF THE COMMISS				
2. Principal Place of Business 3. Mailing Address					
Suite, Apt. #, etc. Suite, Apt. #, etc.	Suite, Apt. #, etc.				
City & State City & State		CHECK HERE	IF MAKING	CHANGE	S
		4. FEI Number 04-356343	33		ot Applicable
Zip Country Zip Co	ountry	5. Certificate of Status Desired		5.00 A	ditional
6. Name and Address of Current Registered Agent				ee Requir	
HOOPER, JAMES W	Name		- Carolio Caro	yon	· · · · · · · · · · · · · · · · · · ·
9818 RED REEF COURT Street Addre		P.O. Box Number is Not Acceptable	e)	 ·	
FT MYERS FL 33919			<u></u>		
	City		FL	Zip Cod	
The above named entity submits this statement for the purpose of changing its registe the obligations of registered agent.	ered office or registere	ed agent, or both, in the State of Flo	orida. I am fa	 miliar with	and accept
SIGNATURE					
	ered Agent signature required v	when reinstating)	DATE		
FILE NOW!!!	FEE IS \$50.00		×.		
Make Check Payable to F	lorida Departmen	nt of State		•	
	May 1, 2003	·	<u> </u>		
140-14		ADDITIONS/	CHANGES		
MANE DI AIO JOHN 5	rle Me		I	Change	☐ Addition
STREET ADDRESS ASSAULT	REET ADORESS				
PITV PT 7/D	TY-ST-ZIP				
TITLE MGR Delete TIT	IF -			7.05	<u></u>
NAME LICOPED IAMED M	ME		L	Change	Addition
STREET ADDRESS 9818 RED REEF COURT STR	REET ADDRESS				
	Y-ST-ZIP				
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NIV CT 716	REET ADDRESS Y-ST-ZIP				
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11. 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: