

NOV-21-2002 11:16 CT CORPORATION
11/19/2002 12:49 FAX 2059796313

SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JAN -7 AM 9:10

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M01000002754

1. Entity Name

TOWNE PLACE, LLC

2. Principal Place of Business

3701 GARDEN PLAZA WAY

Suite Apt. B, etc.

3. Mailing Address

1450 STONEHILL DRIVE

Suite Apt. B, etc.

SUITE 250

DO NOT WRITE IN THIS SPACE

05-12-02 90597 004 \$50

City & State

ORLANDO FL

City & State

BIRMINGHAM AL

4. FEI Number

☒ Applied For
Not Applicable

5. Certificate of Status Desired

☐\$5.00 additional
Fee Required

Zip

32837

Country

USA

Zip

35242

Country

USA

7. Name and Address of Current Registered Agent

Name

CT CORPORATION SYSTEM

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

1200 SOUTH PINE ISLAND ROAD

City PLANTATION

FL

Zip Code

33324

8. The undersigned entity swears this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

DALE W. MORRIS

ASSISTANT VICE PRESIDENT

November 20, 2002

SIGNATURE

Dale W. Morris

Signature typed in correct name of registered agent and not of applicant.

MANAGING MEMBERS / MANAGERS

NAME

MR. M.

NAME

JACK FIDELLA, III

STREET ADDRESS

1450 STONEHILL DRIVE SUITE 250

CITY, ST., ZIP

BIRMINGHAM AL 35242

NAME

NAME

STREET ADDRESS

CITY, ST., ZIP

NAME

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STREET ADDRESS

CITY, ST., ZIP

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STREET ADDRESS

CITY, ST., ZIP

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NAME

STREET ADDRESS

CITY, ST., ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 when duly sworn. I am a managing member or manager of the limited liability company of the registrant or I have been authorized to execute this report as required by Chapter 606, Florida Statutes.

SIGNATURE:

Dan Fiddella

11/20/2002 (205) 969 1131

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

Division Form 1

CR2003B (12/01)