

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 07, 2003 8:00 am**  
**Secretary of State**

04-07-2003 90004 038 \*\*\*150.00

**DOCUMENT # M02000000258**

1. Entity Name

**NORTH STAR TECHNICAL SERVICES, LLC**



Principal Place of Business

**1900 INTERNATIONAL PARK DR.  
BIRMINGHAM AL 35243**

Mailing Address

**1900 INTERNATIONAL PARK DR.  
BIRMINGHAM AL 35243**

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 **63-1269057**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00**  
**Make Check Payable to Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☒ Delete  
NAME **EDMONDS, BRYSON**  
STREET ADDRESS **1900 INTERNATIONAL PARK DR.**  
CITY-ST-ZIP **BIRMINGHAM AL 35243**

TITLE **MGR** ☒ Delete  
NAME **DANIELS, JIM**  
STREET ADDRESS **1900 INTERNATIONAL PARK DR.**  
CITY-ST-ZIP **BIRMINGHAM AL 35243**

TITLE **MGR** ☐ Delete  
NAME **JOHNSON, WILLIAM G**  
STREET ADDRESS **1900 INTERNATIONAL PARK DR.**  
CITY-ST-ZIP **BIRMINGHAM AL 35243**

TITLE **MGR** ☐ Delete  
NAME **MCCARTY, JOE**  
STREET ADDRESS **1900 INTERNATIONAL PARK DR.**  
CITY-ST-ZIP **BIRMINGHAM AL 35243**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Change ☒ Addition  
NAME **GARY DEAN COONS**  
STREET ADDRESS **1900 INTERNATIONAL PARK DR.**  
CITY-ST-ZIP **BIRMINGHAM, AL 35243**

TITLE **MGR** ☐ Change ☒ Addition  
NAME **GEORGE EDWARD CASSADY**  
STREET ADDRESS **1900 INTERNATIONAL PARK DR.**  
CITY-ST-ZIP **BIRMINGHAM, AL 35243**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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)(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:

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

**3/31/03**

Date

**205-972-6910**

Daytime Phone #

CR2E083 (10/02)

0066782