

2001 UNIFORM BUSINESS REPORT (UBR)

0031891 SP

DOCUMENT # M97000000430

1. Entity Name
T.I.C. ENTERPRISES, L.C.

FILED

01 MAR 26 PM 5: 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
645-1 HEMBREE PARK DRIVE
ROSWELL GA 30076

Mailing Address
645-1 HEMBREE PARK DRIVE
ROSWELL GA 30076

2. Principal Place of Business

3. Mailing Address

245 HEMBREE PK. DR. 245 HEMBREE Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 124

Suite 124

City & State

City & State

Roswell, GA 30076

Roswell, GA 30076

Zip

Country

Zip

Country

USA

USA

4. FEI Number 58-2313873

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

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)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE MGR
NAME GREIFF, JAMES N ☐ Delete
STREET ADDRESS 645-1 HEMBREE PARK DRIVE
CITY-ST-ZIP ROSWELL GA 30076

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

TITLE MGR
NAME FOCazio, ROBERT L ☐ Delete
STREET ADDRESS 645-1 HEMBREE PARK DRIVE
CITY-ST-ZIP ROSWELL GA 30076

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

TITLE MGR
NAME KEAN, JOHN JR. ☒ Delete
STREET ADDRESS 550 ROUTE 202-206, P.O. BOX 760
CITY-ST-ZIP BEDMINSTER NJ 07921-0760

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

TITLE MGR
NAME LURIE, ROBERT F ☒ Delete
STREET ADDRESS 550 ROUTE 202-206, P.O. BOX 760
CITY-ST-ZIP BEDMINSTER NJ 07920-0760

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

TITLE MGR
NAME MASSING, LARRY ☐ Delete
STREET ADDRESS 2875 PACES FERRY ROAD
CITY-ST-ZIP ATLANTA GA 30339

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

TITLE ☐ Delete
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

James Greiff, President

Date

Daytime Phone #

3/19/01 (770) 740-8046

CR2E083 (11/00)