

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jun 04, 2004 8:00 am
Secretary of State

06-04-2004 90271 050 ****55.00

DOCUMENT # *M9800001187*

1. Entity Name

Regulus America, LLC



DO NOT WRITE IN THIS SPACE

14023300

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5401 West Kennedy Blvd Suite, Apt. #, etc.		3. Mailing Address 2 International Plaza Suite, Apt. #, etc. Suite 422		4. FEI Number 23-2974594		Applied For Not Applicable	
City & State Tampa, FL		City & State Philadelphia, PA		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required			
Zip 33609	Country	Zip 19113	Country				

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Corporation Service Company
Street Address (P.O. Box Number is Not Acceptable)
1201 Mays Street

City
Tallahassee FL Zip Code
32301

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.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mgr/CEO Richard Long 860 Latour Ct., Napa, CA 94558	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mgr/President Kathleen Hamburger 2012 Corporate Lane, Suite 108 Naperville, IL 60563	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Mgr/CFO Jeffrey Theisen 2 International Plaza, Suite 422 Philadelphia, PA 19113	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
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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: *Jeffrey P Theisen*

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

5/25/04 610-362-7460

Date

Daytime Phone #

CR2E083B (12/02)