2001 UNIFORM BUSINESS REPORT (UBR)

APPROVEL AND FILED

407-226-1000

DOCUMENT # M9900000562 1. Entity Name				OI MAY	-7 AM 10: 20
AP/TEMPUS, LLC				, SECRETA	ARY OF STATE SSEE, FLORIDA
Principal Place of Business 2 MANHATTANVILLE ROAD 2 MANHATTANVILLE ROAD 3 ATTN: RON SOLOTRUK 4 PURCHASE, NY 10577 4 PURCHASE, NY 10577					
2. Principal P	lace of Business	3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WRITE IN THIS SPACE	
City & State		City & State		4. FEI Number 13 - 4054738	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired X	\$5.00 Additional Fee Required
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registe	red Agent
CORPORATION SERVICE COMPANY					1
1201 HAYS STREET			Street Address	s (P.O. Box Number is Not Acceptable)	
TALLAH	ASSEE, FL 32301	-2525			
	•		City		FL Zip Code
8. The above	named entity submits this statement	for the purpose of changing	its registered office or r	registered agent, or both, in the State of F	lorida.
SIGNATURE			: , · · · ·		
SIGITAL OILE	Signature, typed or printed name of registe	ered agent and title if applicable	(NOTE: Registered	Agent signature required when reinstating)	DATE
				8000043	418088
		FILE NOW! Make Check Payabl	!! FEE IS \$50.00 e to Department of \$		101050018 00 *****55.00
9.	MANAGING MEMBER	S/MANAGERS	10.	ADDITIONS/CHANG	SES
TITLE	MRGM	T TNC Delete	TITLE		Change Addition
NAME STREET ADDRESS	^ 843 \ttts @@3 \ttt T T T D D A D		NAME STREET ADDRESS		
CITY - ST - ZIP		0577	CITY - ST - ZIP		
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TITLE		Delete	TITLE		Change Addition
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CITY - ST - ZIP		Dalota	CITY - ST - ZIP		
name		Delete	TITLE NAME		Change Addition
STREET ADDRESS			STREET ADDRESS		:
CITY - ST - ZIP	artify that the information supplied with	this filing does not qualify	CITY - ST - ZIP	in Section 119 07/31/i) Florida Statutes	further certify that the
11. I hereby certify that the information supplied with this filling 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 Hability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes. ROGER FARWELL, PRESIDENT					