

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2002 8:00 am
Secretary of State

07-28-2002 90171 014 ****50.00

DOCUMENT # M99000001996

1. Entity Name

JK HARRIS & COMPANY, LLC

Principal Place of Business

**4975 LACROSS ROAD, STE 1115
 N. CHARLESTON SC 29406**

Mailing Address

**4975 LACROSS ROAD, STE 1115
 N. CHARLESTON SC 29406**

911444

2. Principal Place of Business

4995 LACROSS ROAD SUITE 1115

3. Mailing Address

4995 LACROSS ROAD SUITE 1115

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

NORTH CHARLESTON, SC

City & State

NORTH CHARLESTON, SC

Zip

29406

Country

USA

Zip

29406

Country

USA

4. FEI Number

57-1061173

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BEDFORD, LENNY

**1300 EXECUTIVE CENTER DR., STE 232
 TALLAHASSEE FL 32241**

7. Name and Address of New Registered Agent

Name

ADAIR VAN NETTE

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

1300 EXECUTIVE CENTER DR. KOGERKAMA BLDG. # 212

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.

SIGNATURE

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

Adair Van Nette

(NOTE: Registered Agent signature required when reinstating)

DATE

7 17 02

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 HARRIS, JOHN K
 4975 LACROSS ROAD, STE 300
 N. CHARLESTON SC 29406** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 HARRIS, CHARLES R
 4975 LACROSS ROAD, STE 300
 N. CHARLESTON SC 29406** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
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☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 HARRIS, JOHN K.
 4995 LACROSS ROAD SUITE 1115
 NORTH CHARLESTON, SC 29406** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 HARRIS, JOHN R.
 4995 LACROSS ROAD SUITE 1115
 NORTH CHARLESTON, SC 29406** ☒ Change ☐ Addition

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

TITLE
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 CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

CR2E083 (9/01)

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 REQUIRED

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

6-26-02

843-576-2255

Date

Daytime Phone #