## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P00000048660

FLUCK, BRIAN H

26137 LA PAZ RD., SUITE 102

MISSION VIEJO, CA 92691530

Name:

Address:

City-St-Zip:

Entity Name: CNL COMMERCIAL INVESTORS, INC

FILED Jan 31, 2003 Secretary of State

_many man		OWNVIER	51/ L 1144 LOT OTCO, 1140.				
Current Principal Place of Business:				New Prince	New Principal Place of Business:		
	ANGE AVE ), FL 3280°						
Current Mailing Address:				New Mailing Address:			
	FICE BOX 4 ), FL 32802						
FEI Number	: 59-3650068	FEIN	lumber Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
450 S. OR.	ROBERT A ANGE AVE ), FL 3280°	NUE					
	named ent e of Florida.		s this statement for the p	ourpose of changing i	ts registe	red office or registered agent, or both,	
SIGNATUR	RE:						
Electronic Signature of Registered Age				ent	Date		
Election Car	mpaign Finan	cina Trust	Fund Contribution ( ).				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:		() Delete AMES M JR ANGE AVENI FL 328013	JE	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:		() Delete (EVIN B NGE AVENI FL 328013		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DP RALSTON, 450 S. ORA ORLANDO,	ANGE AVE.		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title:	coo	( ) Delete		Title:	COOE	(X) Change ()Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

FLUCK, BRIAN H

26137 LA PAZ RD., SUITE 102

MISSION VIEJO, CA 92691530

SIGNATURE: GARY M. RALSTON P 01/31/2003