COMPANY INFORMATION

Name of Company: 1st Choice _____
2nd Choice _____
3rd Choice _____

Members: Name of Member _____
Address of Member _____
_____
Social Security No. _____
Percentage Interest _____

Name of Member _____
Address of Member _____
_____
Social Security No. _____
Percentage Interest _____

Name of Member _____
Address of Member _____
_____
Social Security No. _____
Percentage Interest _____

Name of Member _____
Address of Member _____
_____
Social Security No. _____
Percentage Interest _____

CONTINUE MEMBER LIST ON SEPARATE SHEET IF NECESSARY

Registered Agent: Name _____
Address _____
□ Check if same as _____
First Member above

Type of Business: _____

For our internal use/files:

CONTACT PERSON: Name & Tel No._____