

2002 UNIFORM BUSINESS REPORT (UBR)

5/22/2002-90216-015-\$55.00-\$55.00
* 9/11/2002-90061-040-\$55.00-\$55.00

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L00000010962

1. Entity Name

R.E.I.M. DEVELOPMENT, L.C.

Principal Place of Business

378 CENTERPOINTE CIR. STE. 1272
ALTAMONTE SPRINGS FL 32701

Mailing Address

P.O. BOX 953066
LAKE MARY FL 32705

2. Principal Place of Business

283 Ganesha Blvd.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

VANDEWATER, GLENN T ESQ.
378 CENTERPOINTE CIR, STE. 1272
ALTAMONTE SPRINGS FL 32701

4. FEI Number

59-3680376

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State
Due By September 25, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

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

9-7-02

(407) 4933500

Date

Daytime Phone #

CR2E083 (4/02)