## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L0100000985

1. Entity Name

## JOHNSON EUBANK PANKRATZ & COMPANY FINANCIAL SERVICES, LLC



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90270 038 \*\*\*\*50.00

rincipal riac	e or Business	Mailing Address							
•			220 South Ridgewood Avenue. Suite 200 Daytona Beach FL 32114						
2. Principal Place of Business		3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State	<del></del> -	4. FEI Num	ber <b>52-2318110</b>	_		oplied For	
Zip	Country	Zip	Zip Countr			5. Certificate of Status Desired \$5.00 Additional Fee Required			
e sua di suma di	6. Name and Address of Current	Registered Agent			7. Name ar	d Address of New Regis	tered Ac	ent	
				Name					
PANKRATZ, RICHARD M									
220 S. RIDGEWOOD AVENUE, SUITE 200 DAYTONA BEACH FL 32114				Street Address (P.O. Box Number is Not Acceptable)					
DATIONA BEAUTITE SETT				City	-	<u> </u>		Zin Cod	
				City			FL	Zip Cod	e
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 a	d Agent signature re	equired when reinstating)	· · · · · · · · · · · · · · · · · · ·	DATE				
		E0 E M	73A/111 E	EE 10 650					
FILE NOW!!! FEE IS \$50.00									
		Make Check Payab			rtment of State				ļ
		Du	e By Ma	ıy 1, 2003	•				1
9.	MANAGING MEMBERS/MANAGERS 10.					ADDITIONS/CHA	NGES		
	140044					ADDITIONOTOR		7 0	
TITLE		☐ Delete	TITLE	1			l	Change	☐ Addition
NAME	JOHNSON, ROBERT L		NAM						
STREET ADDRESS	220 S. RIDGEWOOD AVE STE 2	00	1	ET ADDRESS					}
CITY-ST-ZIP	DAYTONA BEACH FL 32114		CITY-	ST-ZIP					
TITLE	MGRM	☐ Delete	TITLE					Change	☐ Addition
NAME	EUBANK, MARJORIE		NAME						
STREET ADDRESS	220 S. RIDGEWOOD AVE STE 2	00	STRE	ET ADDRESS					1
CITY-ST-ZIP	DAYTONA BEACH FL 32114	<b>~</b>	CITY-	-ST-ZIP					
TITLE: ***	MGRM - ASSESSMENT		TITLE					Change	Addition
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NAME		^^							Į
STREET ADDRESS CITY-ST-ZIP	220 S. RIDGEWOOD AVE STE 2	UU		ET ADDRESS ST-ZIP					
G111-31-21F	DAYTONA BEACH FL 32114		_			<del></del>			
TITLE	MGRM	Delete	TITLE				[	Change	Addition
NAME	DEMATTEO, WILLIAM S		NAME	ľ					}
STREET ADDRESS	220 S. RIDGEWOOD AVE STE 20	00		ET ADDRESS					
CITY-ST-ZIP	DAYTONA BEACH FL 32114		CITY-	ST-ZIP					ţ
TITLE		☐ Delete	TITLE		<del></del>			Change	☐ Addition
NAME			NAME		•			-	_
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CITY-ST-ZIP			CITY-	ST-ZIP					

11. I hereby certify that the Information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 HAVE OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4-25-03

381-255-1981

Daytime Phone #