

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000004395

FILED  
Apr 08, 2003  
Secretary of State

Entity Name: 203 COVINGTON STREET OF FLORIDA, L.L.C.

**Current Principal Place of Business:**

5055 WEST COUNTY HIGHWAY 30A-1015 VIZCAYA  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

**Current Mailing Address:**

5055 WEST COUNTY HIGHWAY 30A-1015 VIZCAYA  
SANTA ROSA BEACH, FL 32459

**New Mailing Address:**

P. O. BOX 2527  
SANTA ROSA BEACH, FL 32459

FEI Number: 59-3708440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

POOLE, JOHN M  
5055 WEST COUNTY HIGHWAY 30A-1015 VIZCAYA  
SANTA ROSA BEACH, FL 32459

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: POOLE, JOHN M  
Address: 5055 WEST COUNTY HIGHWAY 30A-1015 VIZCAYA  
City-St-Zip: SANTA ROSA BEACH, FL 32459

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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 is true and accurate and that my electronic 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: JOHN M. POOLE

MGRM

04/08/2003

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date