

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **L94000000582**

1. Entity Name
LAPALOMA GROUP, L.C.

FILED

01 JAN 22 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**9200 MILITARY TRAIL
BOYNTON BEACH FL 33436**

Mailing Address
**9200 MILITARY TRAIL
BOYNTON BEACH FL 33436**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0528969**

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DIONNE, CLAUDE
9200 S MILITARY TRIAL #024
BOYNTON BEACH FL 33436-7039**

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.

SIGNATURE **CLAUDE DIONNE** **1-15-2001**

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGR
DIONNE, CLAUDE
9200 MILITARY TRAIL #024
BOYNTON BEACH FL** Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
DUPONT, ROGER
9200 S MILITARY TRAIL #160
BOYNTON BEACH FL** Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
TAILLEFER, CLAUDE
9200 MILITARY TRAIL #125
BOYNTON BEACH FL** Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
MARTEL, PAUL
9200 S MILITARY TRAIL #019
BOYNTON BEACH FL** Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
BERNATCHEZ, JEAN Y
9200 MILITARY TRAIL #123
BOYNTON BEACH FL** Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
BOUPPARD, THERSE
9200 S MILITARY TRAIL #033
BOYNTON BEACH FL** Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
FINET, JACQUES
9200 MILITARY TRAIL #175
BOYNTON BEACH FL** Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**200003575882--8
-01/26/01--01023--003
*****50.00 *****50.00** Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**MGRM
MONETTE, MAURICE
9200 MILITARY TRAIL #224
BOYNTON BEACH FL** Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Change Addition

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: **1-15-2001** **(54) 732-1306**

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

Date

Daytime Phone #

CR2E083 (11/00)