

# 2001 UNIFORM BUSINESS REPORT (UBR)

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**DOCUMENT # L99000000400**

FILED

1. Entity Name  
**SEARSTOWN MALL, L.L.C.**

01 MAR -8 PM 4:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business      Mailing Address  
**3550 SOUTH WASHINGTON AVENUE      3550 SOUTH WASHINGTON AVENUE**  
**TITUSVILLE FL 32780                      TITUSVILLE FL 32780**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

4. FEI Number      Applied For  
**58-2441217 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

**EVANS, JOHN H**  
**1702 SOUTH WASHINGTON AVENUE**  
**TITUSVILLE FL 32780**

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 \_\_\_\_\_ (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

9. MANAGING MEMBERS / MEMBERS		10. ADDITIONS / CHANGES	
TITLE	NAME	TITLE	NAME
	<b>MGR</b> <b>SOUTHTOWN PROPERTIES, INC.</b> <b>3901 LEWIS P. OLDS</b> <b>RALEIGH NC 27612</b>		<b>900003891349--8</b> <b>-03/21/01--01111--013</b> <b>*****50.00      *****50.00</b>
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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: Debra J. Hardy, Manager      Date: 3/6/01      Daytime Phone #: 321-269-5921

CR2E083 (11/00)