

2001 UNIFORM BUSINESS REPORT (UBR)

0018149 AF

DOCUMENT # L99000004019

1. Entity Name
PEBBLE CREEK VENTURE II, L.L.C.

FILED

01 FEB 22 AM 7:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
**18530 PEBBLE LAKE COURT
TAMPA FL 33647**

Mailing Address
**18530 PEBBLE LAKE COURT
TAMPA FL:33647**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3588593**

Applied For
Not Applicable

DO NOT WRITE IN THIS SPACE

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

**BRANT, JAMES E
18530 PEBBLE LAKE COURT
TAMPA FL 33647**

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

TITLE NAME Delete
**MGRM
WILLIAM J. BRANT, JR. AND ASSOCIATES
1947 WOODLAWN AVENUE
GRIFFITH IN 46319**

TITLE NAME Change Addition
**200003782832-2
-02/27/01-01078-012
*****50.00 *****50.00**

TITLE NAME Delete
**MGRM
BRANT, JAMES E
18530 PEBBLE LAKE COURT
TAMPA FL 33647**

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME Change Addition

TITLE NAME Delete

TITLE NAME 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: **2/17/2001 8135941008**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)