

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000005252

1. Entity Name
TBS-RANGELINE, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 MAR -1 AM 9:09

Principal Place of Business
112 SOUTH LAKE AVENUE
ORLANDO FL 32801

Mailing Address
112 SOUTH LAKE AVENUE
ORLANDO FL 32801-2704



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

59-3594562

Applied For

Not Applicable

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

HENDERSON, J. SCOTT
112 SOUTH LAKE AVENUE
ORLANDO FL 32801

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

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
J.L. LAND DEVELOPMENT, INC.
101 SPANISH MOSS RD
DAVENPORT FL 33837

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

400003174854-0
-03/17/00-01093-010
*****50.00 *****50.00

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

MGR
TBS DEVELOPMENT-ORLANDO, INC.
112 SOUTH LAKE AVENUE
ORLANDO FL 32801

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

mf 315100

☐ Change ☐ Addition

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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: *[Signature]*

SCOTT M. K. SCOTT, PRESIDENT, J.L. Land Development, Inc
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

CR2E083 (9/99)