2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M0200000707

DAYTONA BEVERAGES, LLC



FILED Apr 14, 2003 8:00 am Secretary of State 04-14-2003 90745 010 ****50.00

Principal Place of Business			Mailing Address								
406 OAK PLACE PORT ORANGE FL 32127			406 OAK PLACE PORT ORANGE FL 32127			Ì					
PORT UNANGE	FL 32121	Γ.	ONT ONANGE TE GETE					NOME KAK BANG BI	1921 48 801 88 040 6	Esti cont 1267 &	PRI
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & State			City & State			4. FÉI ì	4. FEI Number 42-1530527 Applied For Not Applicable				
Zip	Country		Zip Country		try	5. Certi	ificate of	Status Desired	1 🗆	\$5.00 Ad	ditional
6. Name and Address of Current			egistered Agent			7. Nam	7. Name and Address of New Registered Agent				
					Name			-			
UFHEIL, JOHN T 406 OAK PLACE			يرغم بالمحتملين فالماري	Street Address			(P.O. Box Number is Not Acceptable)				
POR	T ORANGE FL 32127			÷							
				City				F			
	named entity submits this ons of registered agent.	s statement for the	e purpose of changing its	registere	ed office or	registered agent,	or both, i	in the State of	Florida. I an	n familiar with,	and accept
SIGNATURE _	Signature, typed or printed name of	of registered agent and til	tle if applicable. (NOTI	E: Registered	d Agent signatur	re required when reinstat	ting)		DATE	· · · · ·	
			FILE NO	OW!!! F	FEE IS \$5	50.00					}
		artment of Sta	ite								
			Due	e By Ma	ay 1, 2003	1					}
9.		GING MEMBERS/	MANAGERS	10.				ADDITION	IS/CHANGE	S	
TITLE	MGRM		☐ Delete	TITLE	:					☐ Change	Addition
NAME	BOWLER, KEVIN F			NAM							ļ
STREET ADDRESS CITY-ST-ZIP	406 OAK PLACE	00107			ET ADDRESS -ST-ZIP						
·	PORT ORANGE FL 3	02121		-	-					☐ Change	☐ Addition
TITLE NAME	UFHEIL, JOHN T		☐ Delete	TITLE							
STREET ADDRESS	406 OAK PLACE				ET ADDRESS						ļ
CITY-ST-ZIP					-ST-ZIP						
TITLE			☐ Delete	TITLE	l	-				☐ Change	☐ Addition
NAME			- A Company of the Aug	NAMI	E Et address					~	
STREET ADDRESS CITY-ST-ZIP					-ST-ZIP				•		
TITLE			☐ Delete	TITLE						☐ Change	☐ Addition
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TITLE			☐ Delete	TITLE						☐ Change	☐ Addition
NAME	i			NAM	E						
STREET ADDRESS					ET ADDRESS						
CITY-ST-ZIP CITY-S					-ST-ZiP						
11. 1 hereby o	ertify that the information	supplied with this	s filing does not qualify fo	r the exe	motion state	ed in Section 119.	.07(3)(i). I	Florida Statute	s. I further c	ertity that the	intormation

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 repeiver or trustee employered to execute this report as required by Chapter 608, Florida Statutes.