

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90077 026 ****50.00

0038216

DOCUMENT # L02000003134

1. Entity Name

BIG ISLAND CAMP KEAIS NO. 2, L.L.C.



Principal Place of Business

**2375 NORTH TAMiami TRAIL, STE. 206
NAPLES FL 34103**

Mailing Address

**2375 NORTH TAMiami TRAIL, STE. 206
NAPLES FL 34103**

2. Principal Place of Business

4125 Oil Well Road
Suite, Apt. #, etc.

3. Mailing Address

7000 Big Island Ranch Rd.
Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

NAPLES, FL

City & State

NAPLES, FL

4. FEI Number

04-3598066

Applied For

Not Applicable

Zip

34120

Country

USA

Zip

34120

Country

USA

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**MCDANIEL, WILLIAM L JR.
2375 NORTH TAMiami TRAIL, STE. 206
NAPLES FL 34103**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

7000 Big Island Ranch Road

City

NAPLES

FL

Zip Code

34120

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE ☐ Delete
NAME **WILLIAM L. MCDANIEL, JR.**
STREET ADDRESS **7000 BIG ISLAND RANCH ROAD**
CITY-ST-ZIP **NAPLES, FL 34120**

TITLE ☐ Delete
NAME **JAMES E. IVY, JR.**
STREET ADDRESS **2280 19TH ST. SW.**
CITY-ST-ZIP **NAPLES, FL 34120**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☒ Addition
NAME **MGRM WILLIAM L. MCDANIEL, JR.**
STREET ADDRESS **7000 BIG ISLAND RANCH RD.**
CITY-ST-ZIP **NAPLES, FL 34120**

TITLE ☐ Change ☒ Addition
NAME **MGRM JAMES E. IVY, JR.**
STREET ADDRESS **2280 19TH ST. SW.**
CITY-ST-ZIP **NAPLES, FL 34120**

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 REQUIRED

239-455-1218

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

Date

Daytime Phone #

CR2E083 (10/02)