

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90584 014 *****55.00

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DOCUMENT # M98000000815

1. Entity Name

OCEAN PARK, LLC



Principal Place of Business

592 SOUTH THIRD STREET
COLUMBUS OH 43215

Mailing Address

592 SOUTH THIRD STREET
COLUMBUS OH 43215

2. Principal Place of Business

4110 EL MAR Drive

3. Mailing Address

Villa Caprice

Suite, Apt. #, etc.

Lauderdale-By-the-Sea, Fl.

Suite, Apt. #, etc.

4110 EL MAR Drive

City & State

City & State

Lauderdale-By-the-Sea, Fl.

Zip

33308

Country

U.S.A.

Zip

33308

Country

U.S.A.



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 31-1603172

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BINNING, BOYD J
2115 N. OCEAN BLVD.
FT. LAUDERDALE FL 33305

7. Name and Address of New Registered Agent

Name

Penelope Binning

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

Villa Caprice

4110 EL MAR Drive

City

Lauderdale-By-the-Sea, FL

Zip Code

33308

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 reappointing)

DATE

Penelope Binning owner/mgr 4-28-03

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BINNING, PENELOPE 592 S. THIRD ST. COLUMBUS OH 43215	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4110 EL MAR Drive Lauderdale-By-the-Sea, Fl. 33308	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BINNING, BOYD J 592 S. THIRD ST. COLUMBUS OH 43215	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEM SPANGLER, LEROY A 7445 CUMMINS CT NEW ALBANY OH 43054	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	member Binning, Peter 5027 Del Monte Ave. #10 SAN Diego, Calif. 92107	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	member Simoneau, Alicia 15 Edmunds Road New London, N.H. 03257	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Penelope Binning 4-28-03

CR2E083 (10/02)