

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 05, 2004 8:00 am
Secretary of State

03-05-2004 90008 008 ***150.00

DOCUMENT # **601390**

1. Entity Name

REASBECK & FEGERS PROPERTIES, INC.



DO NOT WRITE IN THIS SPACE

54015293

2. Principal Place of Business

5916 MCENROE CT.

Suite, Apt. #, etc.

3. Mailing Address

5916 MCENROE CT.

Suite, Apt. #, etc.

City & State

LEESBURG, FL

Zip

34748

Country

US

City & State

LEESBURG, FL

Zip

34748

Country

US

4. FEI Number

59-1272239

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

R.J. FEGERS

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

5916 MCENROE CT.

City

LEESBURG

FL

Zip Code

34748

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

DATE

FEE IS \$50.00 - 150.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS / MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**RD
REASBECK, LEILA A
153 CRESTVIEW TERR.
LAKE PLACID, FL 33852**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VD
FEGERS, E. RUTH
5916 MCENROE CT.
LEESBURG, FL 34748**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**STD
FEGERS, R.J.
5916 MCENROE CT. 34748
LEESBURG, FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

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

R.J. FEGERS

3-1-04 (352) 787-3826

Date

Daytime Phone #

CR2E083B (12/02)

Attachment

401390

54015293

R.J. and E. Ruth Fegers
5916 McEnroe Court
Leesburg, Florida 34748
(352) 787-3826

MESSAGE

TO: DIVISION OF CORPORATIONS
P.O. BOX 6478
TALLAHASSEE, FL 32314

RE: REASBECK & FEGER'S
PROPERTIES INC.,
A FLA. CORP.

DATE: 3-1-04

DEAR SIR,

WHEN I CALLED YOUR DEPARTMENT ~~REPORT~~
FOR A BUSINESS REPORT, BECAUSE ONE WAS
NOT SENT TO ME IN THE MAIL, THIS
IS THE FORM I RECEIVED, SO I IMPROVISED.
I HOPE ALL IS OK.

THERE ARE NO CHANGES FROM THE
PREVIOUS YEAR.

THANK YOU

SIGNED: 