

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000000401

1. Entity Name
MCGOVERN HOLDINGS, L.L.C.

FILED

01 FEB 15 AM 8:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business
701 PEACHTREE ROAD
ORLANDO FL 32804

Mailing Address
701 PEACHTREE ROAD
ORLANDO FL 32804

2. Principal Place of Business
c/o Webster & Partners, P.L.
Suite, Apt. #, etc.
1936 Lee Road, Suite 101
City & State
Winter Park, FL

3. Mailing Address
c/o Webster & Partners, P.L.
Suite, Apt. #, etc.
PO Box 2310
City & State
Winter Park, FL

DO NOT WRITE IN THIS SPACE

Zip
32789
Country
USA

Zip
32790-2310
Country
USA

4. FEI Number
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
UWSA SERVICES INC.
701 PEACHTREE ROAD
ORLANDO FL 32804

7. Name and Address of New Registered Agent
Name
W & P Services, Inc.
Street Address (P.O. Box Number is Not Acceptable)
1936 Lee Road, Suite 101
City
Winter Park
FL
Zip Code
32789

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 David A. Webster 23 Jan 01
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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCGOVERN, THEODORE 701 PEACHTREE ROAD ORLANDO FL 32804 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCGOVERN, MARIA 701 PEACHTREE ROAD ORLANDO FL 32804 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR McGovern, Theodore 1936 Lee Road, Suite 101 Winter Park, FL 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR McGovern, Maria 1936 Lee Road, Suite 101 Winter Park, FL 32789 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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"/> Change <input type="checkbox"/> Addition
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)(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: Theodore McGovern 1-23-01 407-691-0500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

0006670 AF

CR2E083 (11/00)