

# 2001 UNIFORM BUSINESS REPORT (UBR)

0021837 AF

DOCUMENT # L00000000575

1. Entity Name  
HALLMARK LEATHER, L.L.C.

FILED  
01 MAY 31 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
6320 S. TAMiami TRAIL 6320 S. TAMiami TRAIL  
SARASOTA FL 34231 SARASOTA FL 34231



DO NOT WRITE IN THIS SPACE

MJM

2. Principal Place of Business Suite, Apt. #, etc.  
3. Mailing Address Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number 65-0991375 Applied For Not Applicable

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

## 6. Name and Address of Current Registered Agent

HUEBSCHER, HEIDI  
6320 S. TAMiami TRAIL  
SARASOTA FL 34231

## 7. Name and Address of New Registered Agent

Name: Kent Runnells  
Street Address (P.O. Box Number is Not Acceptable)  
101 Main St. Suite A  
City: Safety Harbor FL Zip Code: 34695

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: Kent Runnells

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: Chief manager  
NAME: Heidi Huebscher  
STREET ADDRESS: 7978 Royal Birkdale Cir  
CITY-ST-ZIP: Bradenton, FL 34202

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## 10. ADDITIONS/CHANGES

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

TITLE: ☐ Change ☐ Addition  
NAME: 000004430140-6  
STREET ADDRESS: -06/19/01--01078--007  
CITY-ST-ZIP: \*\*\*\*\*50.00 \*\*\*\*\*50.00

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

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TITLE: ☐ Change ☐ Addition  
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STREET ADDRESS: ☐ Change ☐ Addition  
CITY-ST-ZIP: ☐ Change ☐ 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: Heidi Huebscher 4-24-01 941-925-2233

CR2E083 (11/00)