

2001 UNIFORM BUSINESS REPORT (UBR)

001815 AF

DOCUMENT # L00000001587

1. Entity Name

BORS INTERNATIONAL, L.L.C.

FILED

01 FEB 21 PM 2:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

877 EXECUTIVE CENTER DR. WEST
STE 303
ST PETERSBURG FL 33702

877 EXECUTIVE CENTER DR. WEST
STE 303
ST PETERSBURG FL 33702

2. Principal Place of Business

3. Mailing Address

1901 Ulmerton Road

1901 Ulmerton Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

750

750

City & State

City & State

Clearwater, FL

Clearwater, FL

Zip

Zip

33762

Country

Country

USA

33762

USA

4. FEI Number

59-3626527

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GRAY, D. LOCKWOOD
201 N. FRANKLIN STREET
22ND FL
TAMPA FL 33602

Name

Lisa Smithson

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

1901 Ulmerton Road, Suite 750

City

Clearwater

FL

Zip Code

33762

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

Lisa Smithson

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/15/01

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE NAME ☐ Delete
MANAGING MEMBER
Daniel M. Doyle, Sr.
7 Stonegate Drive
Bellaire, FL 33756

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

TITLE NAME ☐ Delete
MANAGING MEMBER
Daniel M. Doyle, Jr.
3 Stonegate Drive
Bellaire, FL 33756

TITLE NAME ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
300003783673--8
-02/27/01--01133--002
*****50.00 *****50.00

TITLE NAME ☐ Delete
MANAGING MEMBER
Lisa Smithson
330 8th Avenue N., #1
Tierra Verde, FL 33715

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

TITLE NAME ☐ Delete
MANAGING MEMBER
Frank McPeak
2834 Sandpiper Place
Clearwater, FL 33762

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

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

Lisa Smithson
Lisa Smithson

Date

Daytime Phone #

2/15/01 (727) 540-9694

CR2ED83 (11/00)