2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000002072					· .		
Edewaard Development Company, L.L.C.				FILED			
Principal Place of Business Mailing Address					1 JUL 20 AN 8:47		
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Fort Lauderdale, FL 33301				Ţ	ECRETARY OF STATE ALLAHASSEE, FLORIDA		
					, , , ,	•	
1	Place of Business	3. Mailing Address	_			•	
436 S.W. 14 Court Suite, Apt. #, etc.		436 S.W. 14 Court Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE		
City & Charles		City & Clots					
City & Stat	derdale, FL	City & State Ft. Lauderdale	, FL		4. FEI Number 65~0984490		Applied For lot Applicable
Zip 33315	Country Broward	Zip 33315	Country Broward	!	5. Certificate of Status Desired	\$5.00 Ac	dditional
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent							
Gregory J. Blodig, Esquire							[
100 West Cypress Creek Road				ddress (F	P.O. Box Number is Not Acceptable)		
Suite 700 Ft. Lauderdale, FL 33309							
	,,,		7 City			FL Zip Cod	de
8. The above named entity, submitterinis statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.							
SIGNATURE 7-16-2001							
SIGNATURE Signature, pupied or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$50.00 200044953022 -07/25/0101045015							
	·	Make Check Pay	able to Depart	ment of		U1U45][]	
9.	MANAGING MEMBE	ERS/MEMBERS	10.	<u> er k</u> aldin	. ADDITIONS/CHAP		
TITLE NAME	MGR C. Craig Edewaard	☐ Delete	TITLE NAME			☐ Change	Addition
STREET ADDRESS	436 S.W. 14 Court		STREET ADDRESS				
CITY-ST-ZIP	Ft. Lauderdale, FL		CITY-ST-ZIP			Change	- Addition
NAME		☐ Delete	TITLE NAME		į.	☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP		1	STREET ADDRESS CITY-ST-ZIP				
TITLE		Delete	TITLE		<u> </u>	☐ Change	Addition
NAME STREET ADDRESS			NAME STREET ADDRESS	l	•		
CITY-ST-ZIP			CITY-ST-ZIP		•	_	
TITLE NAME		☐ Delete	TITLE			Change	☐ Addition
STREET ADDRESS			STREET ADDRESS		•		
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE NAME		☐ Delete	TITLE NAME	٠	:	Change	Addition
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP		:		
TITLE		Delete	TITLE		*	☐ Change	Addition
NAME OF THE PROPERTY OF THE PR			NAME		:	<u>-</u>	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	ť			
11. I hereby certify that the information supplied with this filling 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 path; that I am a managing member or manager of the							
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 (6 de) 7/16/2001							
SIGNATURE:							