2001 UNIFORM BUSINESS REPORT (UBR)

| DOCUMENT # L0000002186 1. Entity Name IB STOCK GROUP, L.L.C. | | | | | | | | | | FIL | _ED | | |
|---|------------|---------------|-------------|--|------------------------|-----------------------|---|---------------------|-----------------|----------------|---------------|---------------------|-----------------------------|
| | | | | | | | | | n | LAPR 13 | PM S | 5: 00 | |
| Principal Place of Business Mailing Address . | | | | | | | | | | | | | |
| 2062 BLUE VIEW COURT NAVARRE FL 32566 | | | | 2062 BLUE VIEW COURT NAVARRE FL 32566 | | | SECRETARY OF STATE TALLAHASSEE, FLORIDA | | | | | | |
| | | | | | | | | | | | | | |
| 2. Principal Place of Business 3. Mailing Address | | | | | | | _ | | | | | 88319 1881 1198 | I jaina ann 198 1 |
| Suite, Apt. #, etc. | | | | Suite, Apt. #, etc. | | | DO NOT WRITE IN THIS SPACE | | | | | | |
| City & State | | | | City & State | | | | 4. FEI N | umber - 362 | 15612 | | | oplied For ot Applicable |
| Zip | | Country | + - | Zip | Cour | itry | | | | atus Desired | M | \$5.00 Add | ditional |
| 6. Name and Address of Current Registered Agent | | | | | | | | | and Addr | ess of New R | egistered | | |
| LUDWIG, PAMELA E | | | | | | | | | | | | | |
| 2062 BLUE VIEW COURT | | | | | | | Address (F | P.O. Box N | umber is N | ot Acceptable |) | <u></u> . | |
| NAVARRE | E FL 32566 | | | | | | | | | | | T= - | |
| | | | | <u> </u> | | City | | | · | | FL | Zip Cod | · · · · · · |
| 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | | | | | | | | | |
| | | | | | | | | | | 1004 | 037 | <u> </u> | = |
| FILE NOW!!! FEE Make Check Payable to De | | | | | | | | State | 7 | -04/23 | 3/01 55.00 | 01009 **** | -014 \ |
| 9. | | MAN | AGING MEMBI | ERS/MEMBERS | 10. | | | | | ADDITIONS/ | CHANGES | | |
| TITLE NAME STREET ADDRESS | ! | | | ☐ Delete | title Nami Stre | | Ludi | ર ક્રીપ | Pamek e Vie | uCI. | | ☐ Change | Addition |
| CITY-ST-ZIP | | | | | CITY | -ST-ZIP | Na | 10xxe | . FL | 3 356 |) | | |
| TITLE NAME STREET ADDRESS | | | | ☐ Delete | title Nami Stre | | MG! | rm Gary I Blu | le Vieu | 2 CA | | ☐ Change | Addition |
| CITY-ST-ZIP | | - | | | CITY | -ST-ZIP | Nav | arre | FL 3 | 397070 | | | |
| TITLE NAME STREET ADDRESS | | | · .~ · · - | □ Delete | TITLE NAMI STREI | | Edm | Enge | en en | سطهوتت | • | ☐ Change ¯ | Addition |
| CITY-ST-ZIP | | <u> </u> | | | CITY- | -ST-ZIP | MAG | <u> </u> | | 3792 | 7 | | |
| TITLE NAME | | | | ☐ Delete | TITLE NAME | | | ahill | Nano | | | ☐ Change | ■ Audition |
| STREET ADDRESS CITY-ST-ZIP | | | | | | ET ADDRESS -ST-ZIP | | | larku Eville | se Dr. GA 3 | ooth | | |
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| STREET ADDRESS | | | | ÷ | | et address | 822 | 24. T | UVV' | we Dr. | باد حد | 1 | |
| CITY-ST-ZIP TITLE | | | <u> </u> | ☐ Delete | CITY- | ST-ZIP | Law | rence | ev. He | GAZ | XXX | ★ Change | ☐ Addition |
| NAME STREET ADDRESS | | | | | NAME | ET ADDRESS | | | | | | _ • | |
| CITY-ST-ZIP | · | | | | 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 empowared to execute this report as required by Chapter 608, Florida Statutes. | | | | | | | | | | | | | |
| SIGNATURE: Pamila & Ludwig 9 April 2001 936 -4036 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Deptime Phone # | | | | | | | | | | | | | |