

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90370 046 ****50.00

DOCUMENT # L00000002376

1. Entity Name

MAINE WAY SEAFOOD, L.L.C.

(P)

Principal Place of Business

**4227-A BEE RIDGE ROAD
 SARASOTA FL 34233**

Mailing Address

**4227-A BEE RIDGE ROAD
 SARASOTA FL 34233**

970253



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3908 Goodrich Ave
 Suite, Apt. #, etc.

3. Mailing Address

5777 Beneva Rd So
 Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Sarasota, FL

4. FEI Number

65-0985947

Applied For

Not Applicable

Zip

34234

Country

USA

Zip

34233

Country

Sarasota

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**PREWETT, DANIEL L
 5777 BENEVA ROAD SOUTH
 SARASOTA FL 34233**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 KAUFMAN, PETER
 1513 CARIBBEAN DR.
 SARASOTA FL 34231**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 JAWONSKI, JENNIFER
 900 SHIRE STREET
 NOKOMIS FL 34275**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**JAWONSKI, JENNIFER
 900 SHIRE STREET**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 PREWETT, DANIEL L
 4410 GARCIA AVENUE
 SARASOTA FL 34233**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 SOULES, REGINA
 4120 MALDEN DR.
 SARASOTA FL 34241**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 YESLER, BOYD
 900 SHIRE STREET
 NOKOMIS FL 34275**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGR
 WEENICK, BURTON
 3580 BAYOY CIRCLE
 LONGBOAT KEY FL 34228**

TITLE ☐ 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:

[Handwritten Signature]

11/16/02

941-523-0960