2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000002390

FILED Feb 27, 2003 8:00 am Secretary of State 02-27-2003 90004 038 ****55.00

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Principal Plac	ce of Business	Mailing Address							
3451 BONITA	BAY BLVD SUITE 202 NGS FL 34134	3451 BONITA BAY BLVD SUITE 202 BONITA SPRINGS FL 34134							
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2. Principal f	Place of Business	3. Mailing Address	, ou						
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	200	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
Bonita Springs E		City & State		_ .]	4. FEI Num	ber 65-098	9142		pplied For
Zip	Country	. Donita S	Prings F	<u> C</u>					lot Applicable
3413	l	34135	AZÖ		Certifica	te of Status Desi	red 🗶	\$5.00 Ad Fee Require	
	6. Name and Address of Current R	egistered Agent			7. Name ar	nd Address of N	ew Registered		
DEC	COURCE CONCEDIATION PROPERT	TEC INC	Name						
	source conservation propert 1 Bonita Bay Blvd., Suite 202	IES, INC.	Street A	Addrage (P	P.O. Brow Num	bor is Not Asses	toble)		
	NITA SPRINGS FL 34134		ସଂସ	90		ber is Not Accep	ROS	d	
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The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office o	r registere	d agent, or b	oth, in the State	of Florida. I am	n familiar with,	and accept
and obligati	aons of registered agent.								{
SIGNATURE	Signature, typed or printed name of registered agent an	d title if applicable (NOTE:	Registered Agent signat	turn roquired w	uhoo minatatina)				
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		Make Check Payable	to Florida Del By May 1, 200		t of State				
	MANIAGING			_					
9.	MANAGING MEMBER		10.	Г.		ADDITIO	NS/CHANGE		
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TITE THE REDY CO	ertify that the information supplied with th	is juing does not qualify for th	e evemntion etate	ad in Sacti	ion 110 07(2)	(i) Elevide Ctetut	16	with all and a	

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 SIGNATURE OF PRINTED NAME OF SIGNING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE