

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

L00000002588

1. Entity Name

Clariel J. Mulholland, L.L.C.

FILED

01 AUG 24 PM 12:17

Principal Place of Business

1100 Beach Road, Apt. 3K  
Vero Beach, FL 32963

Mailing Address

1100 Beach Road, Apt. 3K  
Vero Beach, FL 32963

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

306-26-8980

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Valdes-Fauli Corporate Services, Inc.  
777 South Flagler Dr., Ste. 500 E.  
West Palm Beach, FL 33401

7. Name and Address of New Registered Agent

Name Patricia F. Cherry, c/o Johns Island  
Property Owners Association  
Street Address (P.O. Box Number is Not Acceptable)  
One Turtle Beach Road

City Vero Beach

FL

Zip Code  
32963

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

*Patricia F. Cherry*

(NOTE: Registered Agent signature required when reinstating)

DATE

7/13/01

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

9. MANAGING MEMBERS / MEMBERS

TITLE Member  
NAME Mulholland, Clariel J.  
STREET ADDRESS 1100 Beach Road, Apt. 3K  
CITY-STATE-ZIP Vero Beach, FL 32963

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP

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NAME  
STREET ADDRESS  
CITY-STATE-ZIP

☐ Change ☐ Addition

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:

*Clariel J. Mulholland*  
Clariel J. Mulholland

7/13/01

201-664-2148

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

Date

Signature Printed

CR2E083 (11/00)

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-08/23/01 01088-013  
\*\*\*\*\*50.00 \*\*\*\*\*50.00