

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90585 040 ****50.00

DOCUMENT # **L000000002968**

1. Entity Name

STETSON INVESTMENTS, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4744 Spinnaker Dr

Suite, Apt. #, etc.

3. Mailing Address

same

Suite, Apt. #, etc.

City & State

Bradenton, FL

City & State

4. FEI Number

65-0994512

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Belle, Michael J.

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

2364 Fruitville Rd.

City

SARASOTA

FL

Zip Code

34237

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.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MANAGING MEMBER
ANTONIO F. UCCELLO III
4744 SPINNAKER DR
BRADENTON, FL 34208**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

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:

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

4/29/02 9417132504

Date

Daytime Phone #

CR2E083B (12/01)