

**FILED**  
**May 30, 2002 8:00 am**  
**Secretary of State**

04-03-2002 90021 013 \*\*\*\*50.00

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000003263

1. Entity Name

YELLOW WATER INVESTMENTS, LLC

Principal Place of Business

1200 RIVER PLACE BLVD., #902  
JACKSONVILLE FL 32207

Mailing Address

1200 RIVER PLACE BLVD., #902  
JACKSONVILLE FL 32207

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR

Applied For  
Not Applicable5. Certificate of Status Desired ☐\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BROWN, BRIAN  
1200 RIVER PLACE BLVD., #902  
JACKSONVILLE FL 32207

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

TITLE: **MGRM**  
 NAME: **LONGLEAF TIMBER COMPANY INC.**  
 STREET ADDRESS: **1200 RIVER PLACE BLVD., #902**  
 CITY-ST-ZIP: **JACKSONVILLE FL 32207**

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10. ADDITIONS/CHANGES

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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

3/3/02

Date

Daytime Phone #

CR2E083 (9/01)