

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

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

05-12-2002 90577 040 \*\*\*\*50.00

DOCUMENT # L00000003623

1. Entity Name

McCarthy Construction Group, LLC

**DO NOT WRITE IN THIS SPACE**

957261

2. Principal Place of Business

5182 N. Ocean Shore Blvd PO Box 354928

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
Palm Beach, FL

City & State  
Palm Beach, FL

4. FEI Number

593648853

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Timothy Conner

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

17 Florida Park Dr., N. Ste 110

City

Palm Beach

FL

Zip Code

32137

**DO NOT WRITE  
IN THIS SPACE**

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  
mgr.  
Derek V. Fowkes P.O. Box  
354928  
Palm Beach, FL 32137

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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

Derek Fowkes

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

5-1-02

386-445-4388

Date

Daytime Phone #

CR2E083B (12/01)