

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000004096

1. Entity Name  
MCSHEPT PROPERTY DEVELOPMENT ONE, LLC

Principal Place of Business  
113 ENFIELD ROAD  
BALTIMORE MD 21212

Mailing Address  
113 ENFIELD ROAD  
BALTIMORE MD 21212

FILED

01 MAY 16 PM 3:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

52-2278381

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BARRINEAU, NICOLE  
417 SHENANDOAH ROAD  
GULF BREEZE FL 32561

Name

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

3404 Santa Rosa Drive

City

Gulf Breeze

FL

Zip Code

32561

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**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE *Robn Bowerland, Trustee*  
NAME *Irrevocable Trust No 1 of Peter E. Bowerland*  
STREET ADDRESS *113 Enfield Road*  
CITY-ST-ZIP *Baltimore, MD 21212*

☐ Delete

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:

*Robn Bowerland*

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

4/11/01

Date

410 244 7745

Daytime Phone #

CFR2E083 (11/00)