

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L00000005042

1. Entity Name
KEVIN L. BOUDROT AND DEBRA A. BOUDROT LLC

Principal Place of Business
417 8TH ST WEST
BRADENTON FL 34205

Mailing Address
417 8TH ST WEST
BRADENTON FL 34205

2. Principal Place of Business

3. Mailing Address
1401 Manatee Avenue West

Suite, Apt. #, etc.

Suite, Apt. #, etc.
#800

City & State

City & State
Bradenton FL

Zip

Country

Zip
34205-6770

Country
USA

4. FEI Number

65-1118446

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

CASWELL, CHRIS
2364 FRUITVILLE ROAD
SARASOTA FL 34237

7. Name and Address of New Registered Agent

Name
Donald Hemke

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

777 S. Harbor Island Boulevard

City
Tampa

FL

Zip Code
33602-5799

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]

4/25/01

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

200004513642--9
-08/03/01-01011-019
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Debra A. Boudrot 1401 Manatee Avenue West, #800 Bradenton FL 34205-6770	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Kevin L. Boudrot 1401 Manatee Avenue West Bradenton FL 34205-6770	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

[Signature]

4-25-01

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

Date

Daytime Phone #

CR2E083 (11/00)