

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000005691

1. Entity Name

IV OCEAN BREEZE, L.L.C.

Principal Place of Business

PO BOX 2779  
SARASOTA FL 34230

Mailing Address

PO BOX 2779  
SARASOTA FL 34230

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1031845

APPLIED FOR

Applied For

Not Applicable

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

BISCHOFF, TINA  
905 SOUTH BOULEVARD OF THE PRESIDENTS  
SARASOTA FL 34236

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

10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
BISCHOFF, TINA M  
905 SOUTH BLVD. OF THE PRESIDENTS  
SARASOTA FL 34236 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
PIERCE, EUGENE L  
905 SOUTH BLVD. OF THE PRESIDENTS  
SARASOTA FL 34236 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
TAYLOR, PAMELA F  
17601 PARKE IN.  
GROSSE ILE MI 48138 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
611 MORNING DOVE  
SARASOTA, FL. 34236

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR  
TAYLOR, ROBERT M  
17601 PARKE IN.  
GROSSE ILE MI 48138 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
611 MORNING DOVE  
SARASOTA, FL. 34236

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ 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: Tina M. Bischoff  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

03/18/02 941-388-1046  
Date Daytime Phone #

FILED  
Mar 29, 2002 8:00 am  
Secretary of State

03-29-2002 90800 031 \*\*\*\*\*50.00

934502



DO NOT WRITE IN THIS SPACE

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CR2E083 (9/01)