

2001 UNIFORM BUSINESS REPORT (UBR)

0028866 AF

DOCUMENT # L00000005796

1. Entity Name

PELICAN LANE LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAR 26 PM 12:44

Principal Place of Business

3727 RICHLAND AVENUE
NASHVILLE TN 37205

Mailing Address

3727 RICHLAND AVENUE
NASHVILLE TN 37205

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

62-1820175

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Chief Manager and Member**
STREET ADDRESS **Elizaboth M. Brown**
CITY-ST-ZIP **117 Laidley Street**
San Francisco, CA 94131

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Secretary and Member**
STREET ADDRESS **Martin S. Brown, Jr.**
CITY-ST-ZIP **3727 Richland Ave.**
Nashville, TN 37205

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Member**
STREET ADDRESS **Margaret W. Brown**
CITY-ST-ZIP **6231 Hillsboro Rd.**
Nashville, TN 37215

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **Member**
STREET ADDRESS **Susanah L. Brown**
CITY-ST-ZIP **4225 Harding Pike, Suite 502**
Nashville, TN 37205

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
500003961615--1
-04/06/01--01008--003
*******50.00 *****50.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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]

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

Date

3/22/01

Daytime Phone #

615-259-1479

CR2E083 (11/00)