

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2003 8:00 am
Secretary of State

03-28-2003 90001 019 *****50.00

DOCUMENT # L00000007289

1. Entity Name

PEANUT PROPERTIES, LLC



Principal Place of Business

**9129 16TH AVE CIR NW
BRADENTON FL 34205**

Mailing Address

**9129 16TH AVE CIR NW
BRADENTON FL 34205**

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 **65-1097478**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BLALOCK LANDERS WALTERS & VOGLER PA
802 11TH ST W
BRADENTON FL 34205**

7. Name and Address of New Registered Agent

Name **TIMOTHY P. LEHMAN**

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

9129 16TH AVE. CIR. N.W.

City **BRADENTON**

FL

Zip Code **34209**

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **DIGNITAS, INC.**
STREET ADDRESS **9129 16TH AV. CIR N.W.**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

TITLE ☐ Change ☐ Addition
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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:

DIGNITAS INC.

TIMOTHY P. LEHMAN

DATE

Daytime Phone #

3/25/03 941-737-7448

CR2E083 (10/02)