

2001 UNIFORM BUSINESS REPORT (UBR)

0020965 AF

DOCUMENT # L00000007293

1. Entity Name
LDG QW-J69, LLC

FILED

01 MAY -1 PM 5:13

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business
**C/O LANDMARK DEVELOPMENT GROUP
2154 TRADE CENTER WAY SUITE 3
NAPLES FL 34109**

Mailing Address
**C/O LANDMARK DEVELOPMENT GROUP
2154 TRADE CENTER WAY SUITE 3
NAPLES FL 34109**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business c/o
Landmark Development Group
Suite, Apt. #, etc.
5668 Strand Court, #108

3. Mailing Address c/o
Landmark Development Group
Suite, Apt. #, etc.
5668 Strand Court, #108

City & State
Naples, FL

City & State
Naples, FL

4. FEI Number
65-1023031

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

Zip Country Zip Country
34110 US 34110 US

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CLASP INC
C/O CUMMINGS & LOCKWOOD
3001 TAMiami TRAIL N 4TH FLOOR
NAPLES FL 34103**

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 _____ (NOT: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State**

**500004274935--3
-05/21/01--01187--015
*****50.00 *****50.00**

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LANDMARK DEVELOPMENT GROUP LLC 2154 TRADE CENTER WAY STE 3 NAPLES FL 34109	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Landmark Development Group, LLC 5668 Strand Court, #108 Naples, FL 34110	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	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.

LANDMARK DEVELOPMENT GROUP, LLC, Manager

SIGNATURE: By: [Signature] SIGNATURE REQUIRED: Arthur Shafran, its Manager 941-597-8400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)