

2001 UNIFORM BUSINESS REPORT (UBR)

0030409 AB

DOCUMENT # L00000008048

1. Entity Name
PINEY WOODS BEACH, L.L.C.

FILED

01 JAN 22 PM 2:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
107 RIDLEY AVENUE
LAGRANGE GA 30240

Mailing Address
107 RIDLEY AVENUE
LAGRANGE GA 30240

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

58-2561195

Applied For

Not Applicable

Zip

Country

Zip

Country

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

LINDSEY, WM. SCOTT
1407 PIEDMONT DRIVE EAST
TALLAHASSEE FL 32312

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
NAME
STREET ADDRESS
CITY-ST-ZIP
Managing Member
Ellis C Smith
107 Ridley Ave
Lagrange, GA 30240

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000003575880-4
-01/26/01--01023--002
*****50.00 *****50.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Member
Deborah A. Smith
107 Ridley Ave
Lagrange, GA 30240

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Ellis C Smith
Managing Member

Date

Daytime Phone #

1/11/01 1-906-882-9251

CR2E083 (11/00)