

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90009 042 ****50.00

DOCUMENT # L00000008407

1. Entity Name

GVC REAL ESTATE SERVICES, LLC



Principal Place of Business

**7345 SAND LAKE ROAD, SUITE 209
ORLANDO FL 32819**

Mailing Address

**7345 SAND LAKE ROAD, SUITE 209
ORLANDO FL 32819**

2. Principal Place of Business

4981 BRIGHTMOUR CR

Suite, Apt. #, etc.

3. Mailing Address

4981 BRIGHTMOUR CR

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

ORLANDO FL

Zip

32837

Country

US

Zip

32837

Country

US

4. FEI Number

59-3659495

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**



☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**QUINTERO-CLAPPERTON, DANIEL
7345 SAND LAKE ROAD, SUITE 209
ORLANDO FL 32810**

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. 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

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete
NAME **QUINTERO-CLAPPERTON, DANIEL**
STREET ADDRESS **7345 SAND LAKE ROAD, SUITE 209**
CITY-ST-ZIP **ORLANDO FL 32810**

TITLE **MGR** ☒ Change ☐ Addition
NAME **QUINTERO-CLAPPERTON, DANIEL**
STREET ADDRESS **8625 DOVER OAKS CT**
CITY-ST-ZIP **ORLANDO, FL 32836**

TITLE **MGRM** ☐ Delete
NAME **ALVARADO, VICTOR**
STREET ADDRESS **7345 SAND LAKE RD STE 209**
CITY-ST-ZIP **ORLANDO FL 32819**

TITLE **MGRM** ☒ Change ☐ Addition
NAME **ALVARADO, VICTOR**
STREET ADDRESS **4981 BRIGHTMOUR CR**
CITY-ST-ZIP **ORLANDO, FL 32837**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Delete
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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:

VICTOR ALVARADO

04/05/2003

407 345 0726

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

Date

Daytime Phone #

CR2E083 (10/02)