

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000009018

1. Entity Name

JWJ ASSOCIATES, L.L.C.

FILED

01 JAN 17 PM 3:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1510 HANCOCK BRIDGE PARKWAY  
CAPE CORAL FL 33990

Mailing Address

1510 HANCOCK BRIDGE PARKWAY  
CAPE CORAL FL 33990

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

65-1027584

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

WOODROW, BARRY  
11851 ISLAND AVENUE  
MATLACHA FL 33993

7. Name and Address of New Registered Agent

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

TITLE NAME MGRM  
STREET ADDRESS WOODROW, WILSON & CROSS, INC.  
CITY-ST-ZIP 11851 ISLAND AVENUE  
MATLACHA FL 33993 ☐ Delete

TITLE NAME MGRM  
STREET ADDRESS PROFESSIONAL TAX & BOOKKEEPING SERVICE, IN  
CITY-ST-ZIP 4418 SE 12TH AVENUE  
CAPE CORAL FL 33904 ☐ Delete

TITLE NAME MGRM  
STREET ADDRESS JENKINS, AMY  
CITY-ST-ZIP 605 WEST 10TH STREET  
LEHIGH ACRES FL 33936 ☒ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

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

TITLE NAME  
STREET ADDRESS  
CITY-ST-ZIP 3000003568163--1  
-01/23/01--01088--016  
MGRM \*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE NAME MGRM  
STREET ADDRESS ARK Consulting, Inc.  
CITY-ST-ZIP 605 W. 10th St.  
Lehigh Acres, FL 33936 ☐ Change ☒ Addition

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

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

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

SIGNATURE:

*Amy Jenkins* REQUIRED

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

Date

01/11/01

941-458-1040

Daytime Phone #

CR2E083 (11/00)