

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90067 003 ****50.00

DOCUMENT # L00000010055

1. Entity Name

FIDDLER'S COVE DEVELOPMENT COMPANY, L.L.C.

Principal Place of Business

**1322 MIRACLE STRIP PKWY., SE
 FT. WALTON BEACH FL 32548**

Mailing Address

**P.O. BOX 1570
 FT. WALTON BEACH FL 32549**

2. Principal Place of Business

**906 Ball Street
 Suite 10**

3. Mailing Address

2004 Tucker Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Perry, Georgia

City & State

Perry, Georgia

Zip

31069

Country

USA

Zip

31069

Country

USA

4. FEI Number

59-3666792

Applied For

Not Applicable

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

**WALTERS, ELIZABETH J
 221 MCKENZIE AVENUE
 PANAMA CITY FL 32401**

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
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 DEAL LAND AND MINERALS, L.C.
 208 HOOD AVENUE
 FT. WALTON FL 32548** ☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MEM
 KLEIN, HERMAN F JR.
 906 BALL ST., STE. 10
 PERRY GA 31069** ☐ Delete

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

TITLE
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☐ 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:

Herman F Klein Jr

4-30-02

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

Date

Daytime Phone #

CR2E083 (9/01)