

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000010947

1. Entity Name

FL EQUIP, LLC

Principal Place of Business

Pointe Orlando Shopping Center
Int'l Drive at Republic Drive
Store #E1/E2
Orlando, FL 32819

Mailing Address

Pointe Orlando Shopping Center
Int'l Drive at Republic Drive
Store #E1/E2
Orlando, FL 32819

2. Principal Place of Business

3. Mailing Address
FL EQUIP, LLC

Suite, Apt. #, etc.

Suite, Apt. #, etc.

15525 N. 83rd Way #B-7

City & State

City & State
Scottsdale, AZ

01 SEP 18 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

4. FEI Number
91-2078383

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

CT-Corporation System
1200 S. Pine Island Rd.
Plantation, FL 33324

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 reappointing)

DATE

FILE NOW! FREE IS \$50.00

Make Check Payable to Department of State

700004611807--4

-09/26/01--01036--015

*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Change ☒ Addition
Managing Member
FL Holding Co., Inc. Ronald C. Malone, Pres.
15525 N. 83rd Way #B-7
Scottsdale, AZ 85260

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP ☐ Delete

TITLE
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CITY - ST - ZIP ☐ Change ☐ Addition

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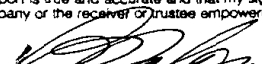
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 

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

19/13/01

Daytime Phone #

CR2E083 (11/00)