2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

Mailing Address

PALM BEACH FL 33480

3. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

P.O. BOX 2154

DOCUMENT # L00000011049

1. Entity Name

COBBLESTONE YARD LLC

Principal Place of Business

% RICHARD H. REVENTLOW

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

201 BERMUDA LANE PALM BEACH FL 33480



FILED Jan 06, 2003 8:00 am Secretary of State

01-06-2003 90130 046 ****50.00



CHECK HERE IF MAKING CHANGES

Applied For 4. FEI Number NOT APPLICABLE

Not Applicable \$5.00 Additional

5. Certificate of Status Desired

Fee Required 7. Name and Address of New Registered Agent

ATTERBURY, WILLIAM W III ESQ 321 ROYAL POINCIANA PLAZA, SOUTH PALM BEACH FL 33480

Country

6. Name and Address of Current Registered Agent

Name Street Address (P.O. Box Number is Not Acceptable) Zip Code City

В.	The above named entity submits this statement for the purpose of c	hanging its re	egistered office or registered agent, or both, in the State of Florida. I am familia	with, and accept
	the obligations of registered agent.			

Country

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Read Agent signature required when reinstating)

Make Check Payable to Florida Department of State

~		Due	By May 1, 2003		
9	MANAGING MEMBERS	MANAGERS	10.	ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM REVENTLOW, RICHARD H 201 BERMUDA LANE PALM BEACH FL 33480	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	17th Shirt Francisco	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME : STREET ADDRESS CITY - ST-ZIP	Change	
TITLE NAME STREET ADDRESS		□ Delete	TITLE NAME STREET ADDRESS CITY-SI-7IP	☐ 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.