

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000011172

1. Entity Name
THE DUNES GROUP, L.L.C.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAR 20 AM 9:49

Principal Place of Business

8700 133RD AVE N
LARGO FL 33773-1512
US

Mailing Address

8700 133RD AVE N
LARGO FL 33773-1512
US

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 59-3671489

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

ENGLANDER, LEONARD S
721 1ST AVENUE NORTH
ST. PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

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

TITLE MGR
NAME ROSENBERGER, KEVIN
STREET ADDRESS 2184 PINNACLE CIRCLE S.
CITY-ST-ZIP PALM HARBOR FL 34684 ☐ Delete

TITLE MBR
NAME HEALEY, THOMAS
STREET ADDRESS 700 SHARKEY ROAD
CITY-ST-ZIP LARGO FL 33771 ☒ Delete

TITLE MBR
NAME BRAKSHAW, MARVIN
STREET ADDRESS 1050 LAKE WILLIAMS DRIVE
CITY-ST-ZIP OCESSA FL 33556 ☒ 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 MGR
NAME Patricia Rosenberger
STREET ADDRESS 2184 Pinnacle Circle S.
CITY-ST-ZIP Palm Harbor, FL 34684 ☐ Change ☒ Addition

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

TITLE Mr. Rosenberger
NAME called 3/20/03
STREET ADDRESS he & Patricia Rosenberger
CITY-ST-ZIP should be listed as "mgrm" ☐ Change ☐ Addition
up 3/20/03

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: [Signature] REQUIRED

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

Date

Daytime Phone #

2/23/03

CR2E083 (10/02)