2001 UNIFORM BUSINESS REPORT (UBR)

1. Entity Name	4664				ं हो।ईंडे ,न	·		^	D.
LIMETREE LANE, L.L.C.					FIL	ED.			1
Principal Place of Business Ma	ailing Address			01	QCT -	Ep 25	2:172	14	/
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	ENICE FL 34293			ŢΑ	ECRETAR LLAHASS	EE FLO	ŘĺĎA		
2. Principal Place of Business 3.	Mailina Address	/4 :	0						
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Suite, App. #, etc.	Suite, Apt. #/etc.	3			DC	NOT WRIT	E IN THIS S	SPACE	
Vigila FL	City State State	r Mi		4. FELL	Jumber 1 -	765	388		oplied For ot Applicable
734293 Country	48301	Country	50-	5. Certi	ficate of Statu	s Desired		\$5.00 Add Fee Require	
6. Name and Address of Current Regis	tered Agent	Name		7. Nam	e and Addres	s of New Ro	egistered A	\gent	
PETER, LYNNE C	يموه الرابيجين مخواه والراب				lumber is Not		-	-	
15 CORNELL ROAD VENICE FL 34293		Street	. Address (f	P.O. BOX I	Number is INO	Acceptable	· ·		
12/11/22 2 0/12/0		City					FL	Zip Cod	e
8. The above named entity submits this statement or the p	urpose of changing its r	eaistered office	or register	ed agent.	or both, in the	State of Flo		<u> </u>	
SIGNATURE LAND, HONG	2	1.25-	01	9	+748	164	5/	256	<i>,</i>
Signature, typed or printed name of registered agent and title in	f applicable. (NOTE:	Registered Agent sign	nature required	when reinstati	ing)	Ψ.Ε.	DATE		
	1	W!!! FEE IS	\$50.00		[
. [Make Check Pay Due By	able to Depa September 20	rtment of	State	4000	-10/15/	/01 01	10330	5 026
D. MANAGING MEMBERS/M.	Due By		rtment of	f State	-		/010: 55.00		5 026 55.00
THE Houseing Hampel	Due By	10.	rtment of	State	-	-10/15/ *****	/010: 55.00	10330	026 55.00
ITLE Housing planner Lynne Chroton STREET ADDRESS (Concil Road	Due By	September 20	rtment of 6, 2001	State	-	-10/15/ *****	/010: 55.00	1033(*****	55.00
Housing Month Divine Lynne Collected Control Road CITY-ST-ZIP Jeuice FL 34293	Due By	10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	rtment of 6, 2001	State	-	-10/15/ *****	/010: 55.00	1033(**********************************	55 , 00 ☐ Addition
TITLE Hanaging Manhall Lynne Cilibrates IC Cornel Road CITY-ST-ZIP Jource FL 34292 TITLE Hanaging Manha	Due By	September 20 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	rtment of 6, 2001	f State	-	-10/15/ *****	/010: 55.00	1033(*****	55.00
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