

2001 UNIFORM BUSINESS REPORT (UBR) AMENDED

DOCUMENT # L0000015081

1. Entity Name
WEST PLAZA PARK, LLC, f/k/a
THE HADLOW COMPANY, LLC

Principal Place of Business
1651 Seminole Road
Atlantic Beach, FL 32233

Mailing Address
1651 Seminole Road
Atlantic Beach, FL 32233

FILED

01 AUG -9 PM 12:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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
59-3687941

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

RAX CO.

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

c/o Jason E. Campbell

50 North Laura Street, Suite 3300

City

Jacksonville

FL

Zip Code

32202

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

Jason E. Campbell

Jason E. Campbell, VP

8/6/2001

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

M
Hadlow, Bryce P.
1651 Seminole Road
Atlantic Beach, FL 32233

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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-08/14/01--01000000
*****50.00 *****50.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

M
Bryan, Sheldon C.
66 Dewees Avenue
Atlantic Beach, FL 32233

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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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:

Bryce P. Hadlow

8/6/2001

(904) 247-0047

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

Date

Daytime Phone #

CR2E083 (11/00)