

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000000028

1. Entity Name

FLAGLER OCEANFRONT ENTERPRISES, LLC

Principal Place of Business

Mailing Address

2. Principal Place of Business

BFM

3. Mailing Address

1544 S. OCEANSHORE

Suite, Apt. #, etc.

1544 S. OCEANSHORE

Suite, Apt. #, etc.

City & State
FLAGLER BEACH, FL

City & State
FLAGLER BEACH, FL

Zip
32136

Country
USA

Zip
32136

Country
USA

4. FEI Number

59-3696333

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

CARL F MAUNEY

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

1544 S. OCEANSHORE BLVD

City

FLAGLER BEACH, FL

Zip Code

32136

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.

CARL F MAUNEY

PRESIDENT

APRIL 10, 2001

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00

Make Check Payable to Department of State

500004035475--0

04/20/01--01064--004

*****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

PRESIDENT / TREASURER
CARL F MAUNEY
1544 S. OCEANSHORE BLVD
FLAGLER BEACH, FL 32136

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VICE PRESIDENT / SECRETARY
REBECCA H. MAUNEY
1544 S. OCEANSHORE BLVD
FLAGLER BEACH, FL 32136

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

CARL F MAUNEY

APRIL 10, 2001

(904) 439-0089

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

Date

Daytime Phone #

CR2E083 (11/00)