

2002 UNIFORM BUSINESS REPORT (UBR)

0060054

DOCUMENT # L01000003106

1. Entity Name

RAND YARD PARTNERS, LLC

FILED

02 APR 30 AM 10:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

PMB BOX 354, 1982 S.R. 44
NEW SMYRNA BEACH FL 32168

Mailing Address

PMB BOX 354, 1982 S.R. 44
NEW SMYRNA BEACH FL 32168

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

HAMES, LAURENCE C
215 NORTH EOLA DRIVE
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name Harold G. Hartsock
Street Address (P.O. Box Number is Not Acceptable)
1311 2nd Street

City Sanford, FL Zip Code 32771

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

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

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-05/03/02--01012--007
*****50.00 *****50.00

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME KELLEY, EOGHAN N
STREET ADDRESS PMB BOX 354, 1982 S.R. 44
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

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

Daytime Phone #

CR2E083 (9/01)