


# **LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
03 APR 25 PM 4:41  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

<b>DOCUMENT #</b>	L01000005329	
<b>1. Entity Name</b>	Cortez West, LLC	

**DO NOT WRITE IN THIS SPACE**

<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>	
1401 8th Ave West Suite, Apt. #, etc.		PO Box 14670 Suite, Apt. #, etc.	
City & State Bradenton		City & State Bradenton	
Zip 34205	Country USA	Zip 34280	Country USA

4/25

DO NOT WRITE IN THIS SPACE

MJH

<b>DO NOT WRITE IN THIS SPACE</b>	<b>4. FEI Number</b>		Applied For
	65-1110762		Not Applicable
	<b>5. Certificate of Status Desired</b> <input type="checkbox"/>		<b>\$5.00</b> Additional Fee Required
	<b>7. Name and Address of Current Registered Agent</b>		
Name Gene Ennis			
Street Address (P.O. Box Number is Not Acceptable)			
1401 8th Avenue West			
City Bradenton		FL	Zip Code 34205

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

*Eugene C Ennis*

4-21-03

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD Ennis, Eugene C 1401 8th Avenue West Bradenton, Florida 34205	TITLE NAME STREET ADDRESS CITY - ST - ZIP	700017109807 04/25/03--01079--016 **\$50.00
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IN THIS SPACE**

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

Date

Daytime Phone #

*Eugene C Ennis* 4-21-03 800 258-5503

CR2E083B (12/02)