## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L0100006396

1. Entity Name

## **BUBBA'S PLACE LLC**



FILED
Jan 13, 2003 8:00 am
Secretary of State
01-13-2003 90571 049 \*\*\*\*50.00

				OF WE !					
Principal Plac	ce of Business	Mailing Address		•					
1423 Lafayette Park Lagrange ga 30241			1423 LAFAYETTE PARK LAGRANGE GA 30241						
2 Principal F	Place of Business	3. Mailing Address							
z. Thropari	lace of business	3. Mailing Address	i						<b>18</b> 11 <b>8 8</b> 114 18 <b>8</b> 1
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State	City & State		4. FEI Numbe	58-185781	1	<del>                                     </del>	applied For lot Applicable
Zip	Country	Zip	Cour	try	5. Certificate of	of Status Desired		55.00 Ac	ditional
	6. Name and Address of Curr	ent Registered Agent	7_:-		7. Name and	Address of New R			
CAL	TER, PATRICIA			Name			ـ حر:		
284	GROVE LANE E PORT FL 32439		Street A		(P.O. Box Number	is Not Acceptable	)		
FNL	E FORT FL 32439			<u></u> -					
				City			FL	Zip Cod	de
8. The above	named entity submits this statemer	nt for the purpose of chang	ing its registere	ed office or register	red agent, or both	, in the State of Flo	rida. I am fa	niliar with,	and accept
the obligat	tions of registered agent.								·
SIGNATURE .	Signature, typed or printed name of registered as	cont and title if applicable	WOTE D			**		<del></del> -	<u>.</u>
	- Synday types of printed the throughter on a	,	· · · · · · · · · · · · · · · · · · ·	Agent signature required			DATE		
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		*	Due By Ma	v 1 2003					
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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.