

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 19, 2002 8:00 am
Secretary of State

08-19-2002 90139 015 ****55.00

DOCUMENT # L01000006471

1. Entity Name

OLD GROVE SOUTH LC

Principal Place of Business

Mailing Address

P.O. BOX 1222
 HOLMES BEACH FL 34218
 US

P.O. BOX 1222
 HOLMES BEACH FL 34218
 US

975480



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

P.O. BOX 1222

P.O. BOX 1222

Suite, Apt. #, etc.

Suite, Apt. #, etc.

CITY & STATE
 HOLMES BEACH FL.

CITY & STATE
 FLORIDA

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip
 34218

Country
 USA

Zip
 34218

Country
 USA

5. Certificate of Status Desired

☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WINHEIM, CHARLES T
 116 52ND ST
 HOLMES BEACH FL 34217

Name

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

City

FL

Zip Code

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

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
Due By September 25, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE *MEM*
 NAME *CHARLES T. WINHEIM*
 STREET ADDRESS *BOX 1222*
 CITY-ST-ZIP *HOLMES BEACH FLORIDA 34218*

☐ Delete

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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:

Charles T. Winheim CHARLES T. WINHEIM

8/14/02

941-778-6743

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

Date

Daytime Phone #

CR2E083 (4/02)