

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000007108

FILED
May 01, 2003
Secretary of State

Entity Name: GAVIN DEVELOPMENT LLC

Current Principal Place of Business:

PO BOX 189
TITUSVILLE, FL 32781 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 189
TITUSVILLE, FL 32781 US

New Mailing Address:

FEI Number: 59-3714287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GAVIN, THOMAS H
PO BOX 189
TITUSVILLE, FL 32781 US

Name and Address of New Registered Agent:

GAVIN, THOMAS
PO BOX 189
TITUSVILLE, FL 32781 US

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: THOMAS GAVIN

05/01/2003

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: GAVIN, THOMAS H
Address: PO BOX 189
City-St-Zip: TITUSVILLE, FL 32781

Title: MGRM () Delete
Name: GAVIN, LAURIE L
Address: PO BOX 189
City-St-Zip: TITUSVILLE, FL 32781

Title: MGRM () Delete
Name: GAVIN, DALE R
Address: PO BOX 189
City-St-Zip: TITUSVILLE, FL 32781

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GAVIN, THOMAS
Address: PO BOX 189
City-St-Zip: TITUSVILLE, FL 32781

Title: MGRM (X) Change () Addition
Name: GAVIN, LAURIE
Address: PO BOX 189
City-St-Zip: TITUSVILLE, FL 32781

Title: MGRM (X) Change () Addition
Name: GAVIN, DALE
Address: PO BOX 189
City-St-Zip: TITUSVILLE, FL 32781

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: THOMAS GAVIN

MGR

05/01/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date