

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000009275

FILED
Apr 22, 2002 8:00 AM
Secretary of State

Entity Name: SEASIDE BUILDERS OF PINELLAS, L.L.C.

Current Principal Place of Business:

650 STARKEY RD.
LARGO, FL 33771

New Principal Place of Business:

309 HARBOR DR
BELLEAIR BEACH, FL 33786

Current Mailing Address:

650 STARKEY RD.
LARGO, FL 33771

New Mailing Address:

309 HARBOR DR
BELLEAIR BEACH, FL 33786

FEI Number: 59-3727966

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOX, GREGORY A
28050 U.S. 19 NORTH, SUITE 100
CLEARWATER, FL 33761 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: SZASZ, STEVE
Address: 701 ST. PETERSBURG DRIVE, WEST
City-St-Zip: LARGO, FL 33771

Title: MGRM () Delete
Name: SZASZ, ROBERT
Address: 701 ST. PETERSBURG DRIVE, WEST
City-St-Zip: LARGO, FL 33771

Title: MGRM () Delete
Name: ADLER, LAZLO
Address: 701 ST. PETERSBURG DRIVE, WEST
City-St-Zip: LARGO, FL 33771

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE SZASZ

MGR

04/22/2002

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