

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010246

1. Entity Name

S.R. HOLDINGS OF VERO, L.L.C.

Principal Place of Business

C/O ROBERT A. SMITH
P.O. BOX 637
VERO BEACH FL 32961-0637

Mailing Address

C/O ROBERT A. SMITH
P.O. BOX 637
VERO BEACH FL 32961-0637

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1120411

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

GARRIS, CHARLES E
817 BEACHLAND BLVD.
VERO BEACH FL 32963

7. Name and Address of New Registered Agent

Name ROBERT A. Smith

Street Address (P.O. Box Number is Not Acceptable)
2 SEA HORSE LANE

City VERO BEACH

FL

Zip Code 32960

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.

SIGNATURE

Robert A. Smith ROBERT A. Smith

4/16 JAN 02

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 May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME SMITH, ROBERT A
STREET ADDRESS P.O. BOX 637
CITY-ST-ZIP VERO BEACH FL 32961-0637

☐ Delete

TITLE
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CITY-ST-ZIP

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10. ADDITIONS/CHANGES

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

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CITY-ST-ZIP

☐ 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:

Robert A. Smith ROBERT A. Smith

4/16 JAN 02

561-778 7862

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

Date

Daytime Phone #

FILED

Jan 14, 2002 8:00 am
Secretary of State

01-14-2002 90019 048 *****50.00

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DO NOT WRITE IN THIS SPACE

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CR2E083 (9/01)