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

## DOCUMENT # L01000010517

SIGNATURE: SIGNATURE AND TYPED OR

1. Entity Name

## GATOR GIRLS COUNTRYSIDE, LLC



**FILED** Feb 17, 2003 8:00 am Secretary of State 02-17-2003 90008 002 \*\*\*\*50.00

	•			See we the	1				
Principal Plac	ce of Business	Mailing Address	<del> </del>		7				
1305 HILL AVE.		1305 HILL AVE.	·						
MANGONIA PARK FL 33407			MANGONIA PARK FL 33407						
·  - 						Bij <b>agipi</b> ikali <b>ba</b> lli <b>a</b> alii		<b>                                   </b>	
2. Principal F	Place of Business	3. Mailing Address	<del></del>	<del>.</del>					
		4				BI 1 BB(B1 (12)1 BB(11 BB(11	TOWN BOND	1101) <b>[110]</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
01.00				O O LEGA TACHE II WANING O PANGES					
City & State		City & State	City & State		4. FEI Numbe	f 65-112504	7		oplied For
Zip	Country	Zip Cour		ntry		· · · · · · · · · · · · · · · · · · ·		<del></del>	lot Applicable
۲.۳	Country	2.0	Country		5. Certificate	of Status Desired		\$5.00 Ad Fee Require	
	6. Name and Address of Curre	nt Registered Agent	egistered Agent			Address of New Ro	gistered	<u> </u>	
HACK OCODOL 6				Name		ing it is a consider the same		***	
	CK, GEORGE S 5 HILL AVE.		Street Address (			P.O. Box Number is Not Acceptable)			
	S MILL AVE. NGONIA PARK FL 33407		Ľ						
1767-(	TOOTHAT AIN I L WTV!		.				•		
			<u> </u>	City			F۱	Zip Cod	 de
8 The above	named entity submits this statement	for the purpose of changing in-		office orist-	real emant as here	:- 4b - C4-4 4 5:			
the obligat	ions of registered agent.	for the purpose of changing its	registerea	Office or register	red agent, or both	n, in the State of Floi	ida. I am	familiar with,	, and accept
CIONIATURE									
SIGNATURE .	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE	E: Registered Ag	gent signature required	d when reinstating)		DATE		
		EII E NO	OWIII EE	E IS \$50.00					
		Make Check Payabl			nt of State				
		•	e By May		or orace				
9.	MANAGING MEM	BERS/MANAGERS	10.	· · · · · · · · · · · · · · · · · · ·		ADDITIONS/	CHANGE		
TITLE	MGRM	Delete	TITLE			ADDITIONS	JI MINGLO	☐ Change	Addition
NAME	HACK, GEORGE S		NAME					onango	
STREET ADDRESS	1305 HILL AVE.		STREET A	ADDRESS		•			
CITY-ST-ZIP	MANGONIA PARK FL 33407		CITY-ST-	-ZIP					
TITLE	MGRM	☐ Delete	TITLE					☐ Change	Addition
NAME	HACK, VIRGINIA		NAME						
STREET ADDRESS CITY-ST-ZIP	1305 HILL AVE.		STREET A						
	MANGONIA PARK FL 33407		CITY-ST-	-217	•••				
TITLE NAME	MGRM HACK, SHANNON	☐ Delete	TITLE					Change	☐ Addition
STREET ADDRESS	1305 HILL AVE.	And the second of the second of the second	NAME STREET A	DOBESS	دم د محبدر	e to work to the	هستندن من		
CITY-ST-ZIP	MANGONIA PARK FL 33407		CITY-ST-						
TITLE	- N. W. C.	☐ Delete	TITLE					☐ Change	Addition
NAME		LJ Octobe	NAME						Addition
STREET ADDRESS			STREET A	DORESS					
CITY-ST-ZIP			CITY-ST-	ZIP					
TITLE		☐ Delete	TITLE					☐ Change	☐ Addition
NAME			NAME						
STREET ADDRESS			STREET AL	l			7		
CITY-ST-ZIP			CITY-ST-	ZIP					
TITLE	i i	. Delete	TITLE				•	Change	☐ Addition
NAME STREET ADDRESS			NAME STREET AL	nnress					
CITY-ST-ZIP			CITY-ST-						
11. Thereby o	ertify that the information supplied wi	th this filing does not qualify for			otion 110 07(2\%)	Florido Statutas 11			-6
indicated (	on this report is true and accurate and oility company or the receiver or trusto	a that my sianatilire shall have ti	he same ler	hal ettent ac it m	sade under oeth: 1	that I am a managir	ig membe	or manage	r of the