

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010575

1. Entity Name

PALAWAN INVESTMENTS, LLC

Principal Place of Business

% JAMES MCARDLE  
4606 WOODLANDS VILLAGE DRIVE  
ORLANDO FL 32835

Mailing Address

% JAMES MCARDLE  
4606 WOODLANDS VILLAGE DRIVE  
ORLANDO FL 32835

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

~~MCARDLE~~  
MCCARDLE, JAMES  
4606 WOODLANDS VILLAGE DRIVE  
ORLANDO FL 32835

4. FEI Number

59-3733170

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional  
Fee Required

7. Name and Address of New Registered Agent

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.

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 May 1, 2002

9. MANAGING MEMBERS / MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MANAGING Member  
James Mc Ardle  
4606 Woodlands Village Drive  
Orlando, FL 32835

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

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10. ADDITIONS / CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
James Mc Ardle  
4606 Woodlands Village Drive  
Orlando, FL 32835

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
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:

SIGNATURE REQUIRED

1-8-02

321-287-8274

FILED  
Jan 11, 2002 8:00 am  
Secretary of State

01-11-2002 90014 024 \*\*\*\*50.00



DO NOT WRITE IN THIS SPACE

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CR2E083 (9/01)