

Amended
**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L01000011007

1. Entity Name

STOCK DEVELOPMENT, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

02 DEC 19 AM 8:57

12/27

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
8946 Mustang Island Circle

3. Mailing Address
8946 Mustang Island Circle

700009594717
12/19/02--01017--006 **50.00
DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Naples, FL

City & State
Naples, FL

4. FEI Number
59-3740488

Applied For
Not Applicable

Zip
34113

Country
USA

Zip
34113

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
Coleman, Kevin G.

Street Address (P.O. Box Number is Not Acceptable)

4001 Tamiami Trail North, Suite 300

City
Naples FL Zip Code 34103

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.

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Managing Member
Kenneth C. Stock
307 Neopolitan Way
Naples, FL 34103

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Managing Member
Brian K. Stock
451 Bay Front Place, Unit 5310
Naples, FL 34102

TITLE
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CITY - ST - ZIP

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**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

12-11-02

Date

Daytime Phone #

CR2E083B (12/01)