

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92178 034 ****55.00

DOCUMENT # L01000014563

1. Entity Name

RICHLAND TOWERS - NASHVILLE, LLC



Principal Place of Business

**4890 W. KENNEDY BLVD., STE. 850
TAMPA FL 33609**

Mailing Address

**4890 W. KENNEDY BLVD., STE. 850
TAMPA FL 33609**

2. Principal Place of Business

4890 West Kennedy Blvd.

Suite 920 etc.

Tampa, FL 33609-1863

3. Mailing Address

4890 West Kennedy Blvd.

Suite 920 etc.

Tampa, FL 33609-1863

Zip

Country

Zip

Country

4. FEI Number

59-3700407

Applied For

Not Applicable

5. Certificate of Status Desired

☒ **\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**WEST, DALE A
4890 W. KENNEDY BLVD., STE. 850
TAMPA FL 33609**

7. Name and Address of New Registered Agent

Name

F&L CORP.

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

THE GREENLEAF BUILDING

200 LAURA STREET, 3RD FLOOR

JACKSONVILLE, FL 32202-3510

City

Zip Code

8. The above named entity submits this statement for the purpose of changing F&L Corp
the obligations of registered agent.

or both, in the State of Florida. I am familiar with, and accept

By: R.J. Wolfe, V.P. 4/28/03

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 Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RICHLAND TOWERS-BROADCAST, INC. 4890 W. KENNEDY BLVD. STE 850 TAMPA FL 33609	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Richland Towers - Broadcast Inc. 4890 W. Kennedy Blvd. Ste 920 Tampa FL 33609-1863	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)