

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

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90016 014 ****50.00

DOCUMENT # L01000014714

1. Entity Name

PARKER LENDING, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9400 Gladiolus Drive

Suite, Apt. #, etc.

Suite 250

City & State

Ft. Myers, FL

3. Mailing Address

9400 Gladiolus Drive

Suite, Apt. #, etc.

Suite 250

City & State

Ft. Myers, FL

DO NOT WRITE IN THIS SPACE

4. FEI Number

01-0619987

☒ Applied For

☐ Not Applicable

Zip

33908

Country

Zip

33908

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Bolanos Truxton, P.A.

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

12800 University Drive

Suite 340

City

Fort Myers

FL

Zip Code
33907

**DO NOT WRITE
IN THIS SPACE**

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
MGR
Reisman, John P.
9400 Gladiolus Drive, Suite 250
Ft. Myers, FL 33908

TITLE
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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)(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 #

CR2E083B (12/01)