

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Oct 02, 2002 8:00 am
Secretary of State

10-02-2002 90117 014 ****50.00

DOCUMENT # L01000020532

1. Entity Name

WEIRICH FLORIDA PROPERTIES, LLC

Principal Place of Business

**579 NE PLANTATION ROAD N304
 STUART FL 34996**

Mailing Address

**579 NE PLANTATION ROAD N304
 STUART FL 34996**

2. Principal Place of Business

3. Mailing Address

10237 NAVAREE COURT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

RICHLAND, VA

Zip

Country

Zip

Country

23233

USA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KERNS, RICHARD
 119 GLEN EAGLE CIRCLE
 NAPLES FL 34104**

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. I am familiar with, and accept the obligations of registered agent.

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 September 25, 2002

9. MANAGING MEMBERS / MANAGERS

10.

ADDITIONS / CHANGES

TITLE **MEM**
 NAME **WILLIAM H. WEIRICH**
 STREET ADDRESS **10237 NAVAREE COURT**
 CITY-ST-ZIP **RICHLAND, VA 23233**

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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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

9-23-02

(804) 780-0060

CR2E083 (4/02)