

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

**FILED**  
**Aug 24, 2004 8:00 am**  
**Secretary of State**

08-24-2004 90047 038 \*\*\*\*50.00

DOCUMENT # **L01000020899**

1. Entity Name

**B&W LAND TRUST, LLC**



**DO NOT WRITE IN THIS SPACE**

**24081312**

2. Principal Place of Business

**5630 N. Hwy 441**

Suite, Apt. #, etc.

3. Mailing Address

**5630 N. Hwy 441**

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**Ocala Fl 34475**

City & State

**Ocala Fl 34475**

4. FEI Number

**80-0029007**

Applied For

Not Applicable

Zip

**34475**

Country

**Marion**

Zip

**34475**

Country

**Marion**

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

**WALTER BORING**

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

**(5630) N. Hwy 441**

City

**Ocala**

FL

Zip Code

**34475**

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00**

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

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**MGR.  
WALTER BORING  
5630 N. Hwy 441  
OCALA Fl 34475**

TITLE  
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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: **Walter Boring**

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

**WALTER BORING**

**8-6-04**

Date

**352 622-5971**

Daytime Phone #

CR2E083B (12/02)