2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000021329

FLORIDA CAPITAL CONSTRUCTION, LLC



FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90105 018 ****50.00

Principal Place of Business			Mailing Address										
300 INTERNATIONAL PKWY., STE. 130 HEATHROW FL 32746			300 INTERNATIONAL PKWY., STE. 130 HEATHROW FL 32746										
)) 1.6 44 1.6 44			BAB (BAK) 1 88)	
2. Principal Place of Business			3. Mailing Address										
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES						
City & State			City & State			4. FEI I	Number	74-302	7201			pplied For ot Applicable	
Zip	Country		Zip Coun		ntry	5. Cert	5. Certificate of Status Desired				\$5.00 Additional Fee Required		
	6. Name	and Address of Current	Registered Agent			7. Nam	ne and A	ddress of I	New Regis	stered Ag	gent		
A-184 A-11844A					Name							ŀ	
	BY, C. THOM		Street Addres:			ress (PO Box N	Number is	s Not Acce	ntable)				
		NAL PKWY., STE. 130		Street Address (P.O. Box Number is Not Acceptable)									
ΠEA	THROW FL (S2/46											
					City	·					Zip Coc	le	
		***************************************								FL			
	named entity ions of registe		r the purpose of changing	its register	ed office or re	gistered agent,	or both,	in the State	of Florida	. I am fai	miliar with,	and accept	
ale obligati	ions or registe	ied agent.											
SIGNATURE .	Signature typed o	r printed name of registered agent	and title if applicable (N	IOTE: Garrietere	vi Acent signature s	required when reinstat	tina)			DATE			
						<u> </u>]			27.114			
					FEE IS \$50								
			Make Check Paya		огіда Depar ay 1, 2003	rtment of Sta	ite						
				oue by IVI	ay 1, 2003								
9.	MODIA	MANAGING MEMBE		10.	····			ADDITI	ONS/CHA				
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NAME STREET ADDRESS	RANKIN, F		TE 400	NAM	EET ADDRESS								
CITY-ST-ZIP		national PKWY s' N FL 32746	IE. 130		-ST-ZIP								
TITLE	MGRM	N FL 32/40	☐ Delete				•				Change	☐ Addition	
NAME	SELBY, C.	THOMAS	L Delete	TITL NAM	- 1					۱	Change	☐ Addition (
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TITLE	MGRM		☐ Delete	TITL	E	-				[Change	☐ Addition	
NAME	ſ	KATHERINE A		NAM	E [-	_	
STREET ADDRESS	300 INTER	NATIONAL PKWYST	E.130	STRE	ET ADDRESS								
CITY-ST-ZIP	<u>HEATHROV</u>	N FL 32746		CITY	-ST-ZIP								
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NAME			C Detect	NAM	I .					·	0ago		
STREET ADDRESS					ET ADDRESS								
CITY-ST-ZIP					-ST-ZIP								
11. I hereby c	ertify that the	information supplied with	this filing does not qualify	for the exe	mption stated	in Section 119.	07(3)(i), F	lorida Stat	utes. I furti	her certif	y that the i	nformation	

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 frustee empowered to execute this report an equired by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE and TYPED OR PRINTED NAME OF SIGNING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE