

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

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90056 001 ****50.00

DOCUMENT # L01000021594

1. Entity Name

TURNING POINT PROPERTIES, L.L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

608 HARBOR DRIVE S.

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 21752

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Venice, FL

City & State

SARASOTA FL

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

34285

Country

U.S.

Zip

34276

Country

U.S.

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Kevin Zeigler

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

608 Harbor Drive South

City

Venice

FL

Zip Code

34285

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 fee if applicable

Kevin Zeigler

4/15/02

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
MANAGER - MGRM
Kevin Zeigler
608 HARBOR DRIVE S.
Venice, FL 34285

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**DO NOT WRITE
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:

Kevin Zeigler

4/15/02

(41) 920-6760

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

Date

Daytime Phone #

CR2E083B (12/01)