

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

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90238 049 ****50.00

DOCUMENT # L01000021821

1. Entity Name

INLAND COMPANIES LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1560 MATTHEW DRIVE

3. Mailing Address

same

Suite, Apt. #, etc.

SUITE G

Suite, Apt. #, etc.

City & State

FORT MYERS, FLORIDA

City & State

Zip

33907

Country

USA

Zip

Country

4. FEI Number

80-0021878

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

ROBERT M. SWEENEY

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

1560 MATTHEW DRIVE

SUITE G

City

FORT MYERS

FL

Zip Code

33907

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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
MANAGER
ROBERT M. SWEENEY
1560 MATTHEW DRIVE SUITE G
FORT MYERS, FLORIDA 33907

TITLE
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CR2E083B (12/01)

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:

Robert M. Sweeney

4-10-02

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

Date

Daytime Phone #