

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2002 8:00 am
Secretary of State

07-18-2002 90135 011 ****50.00

DOCUMENT # L01000022218

1. Entity Name

MC GEE L98 ENTERPRISES, LLC

Principal Place of Business

3636 LASSO LANE
 LAKE LAND FL 33801

Mailing Address

3636 LASSO LANE
 LAKE LAND FL 33801

2. Principal Place of Business

3939 Hwy 98 South

3. Mailing Address

P.O. Box 2230

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Lakeland FL 33813

City & State

Eaton Park 10000 FL

Zip

Country

USA

Zip

33840

Country

USA

4. FEI Number

01-0556307

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**CAMPBELL, TIMOTHY F ESQ.
 CLARK & CAMPBELL, P.A.
 4740 CLEVELAND HEIGHTS BLVD.
 LAKE LAND FL 33813**

7. Name and Address of New Registered Agent

Name **Michael McGee**

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

3939 Hwy 98 South

City **Lakeland**

FL

Zip Code **33813**

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

Michael McGee

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

(NOTE: Registered Agent signature required when reinstating)

7-15-02

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By September 25, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM**
 NAME **MC GEE, MICHAEL J**
 STREET ADDRESS **3939 U.S. HIGHWAY 98 SOUTH**
 CITY-ST-ZIP **LAKE LAND FL 33813**

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10. ADDITIONS/CHANGES

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☐ Change ☐ Addition

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CR2E083 (4/02)

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:

Michael McGee

7-15-02

863-667-3702

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

Date

Daytime Phone #