2002 UNIFORM BUSINESS REPORT (UBR)

DOCU	MENT # L010000	22528						
1. Entity Nar	/E OF LYNN HAVEN, LLC		FILED					
				200				
Principal Place of Business Mailing Address					2002 NOV 26- PM-3: 21			
2750 OLD ST. AUGUSTINE RD. 2750 OLD ST. AUGUSTINE			RD.	101V1	JON OF CORPC	DATIONO		
TALLAHASSEE	FL 32301	TALLAHASSEE FL 32301		FA	JON OF CORPO LLAHASSEE, F	LORIDA:		
Principal Place of Business 3. Mailing Address								
Suite, Apt. #, etc. Suite		Suite Ant # etc	Suite, Apt. #, etc.		DO NOT WRITE IN THE COACE			
Gold, Apr. #, etc.		Outo, Apr. #, c.o.			DO NOT WRITE IN THIS SPACE			
City & State Ci		City & State		4. FEI Number 71 - 24	4. FEI Number Applied For Not Applied For Not Applicable			
Zip Country		Zip	Country	5. Certificate of Status Desired \$5.00 Additional			ditional	
	6. Name and Address of Current F	Registered Agent	<u> </u>	7. Name and Addr	ress of New Registere	Fee Require	<u>bd</u>	
TUA			Name					
THAMES, WILLIAM G 2750 OLD ST. AUGUSTINE RD. TALLAHASSEE FL 32301			Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
17121	D'AUNOCE I E OESO I							
			City		F	Zip Cod	е	
8. The above the obligation	e named entity submits this statement for tions of registered agent.	the purpose of changing its	registered office or reg	istered agent, or both, in t	he State of Florida. I a	am familiar with,	and accept	
SIGNATURE	Signature, typed or printed name of registered agent ar	Alox						
	orginatine, typed or printed name or registered agent ar		E: Registered Agent signature re		DATI	E		
		FILE NO	OW!!! FEE IS \$50 yable to Departme	.00 nt of State				
			September 25, 20					
9.	MANAGING MEMBER	S/MANAGERS	10.		ADDITIONS/CHANG	iES		
TITLE	MEMBER	☐ Delete	TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS	WILLIAM G. THAMES 2750 BLD ST AUGUSTINE A	.o	NAME STREET ADDRESS	800	009177	008	ļ	
CITY-ST-ZIP			CITY-ST-ZIP	800009177008 11/22/0201095002 **: 55:00				
TITLE	MEMBER	☐ Delete	TITLE	·		☐ Change	Addition	
NAME	WILLIAM & THAMES JR		NAME					
STREET ADDRESS CITY-ST-ZIP	2750 OLD ST AUGUSTING R	.₽	STREET ADDRESS	•			ŀ	
	TALLAHASIEE PL 32301		······································	· primary victoria				
TITLE NAME	MEWBER PROPERTIES INC	Delete	TITLE NAME			Change	☐ Addition	
STREET ADDRESS	2750 DLD ST AUGULTINE AC)	STREET ADDRESS					
CITY-ST-ZIP	TALLAHALIEE PL 32301		CITY-ST-ZIP					
TITLE	wender	☐ Delete	TITLE			☐ Change	Addition	
NAME Street address	SAZO OCO ZE YDERZLING	20	NAME					
CITY-ST-ZIP	_		STREET ADDRESS CITY-ST-ZIP					
TITLE	TALLAHASSEE PL 32301	Delete	TITLE			Chanca	- Addition	
NAME		□ Detete	NAME			Change	☐ Addition)	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE)	☐ Delete	TITLE			☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS				1	
CITY-ST-ZIP			CITY-ST-ZIP					
11. I hereby o	pertify that the information supplied with the	nis filing does not qualify for	the exemption stated in	n Section 119.07(3)(i). Flori	da Statutes. I further c	ertify that the in	formation	
mulcaleu	on this report is true and accurate and the bility company or the receiver or trustee of	iai my signature snail nave r	ne same lenal effect of	it made under eath: that I	am a managing mam	ber or manager	of the	

William Gordon Thames, TR.

X NOV. 18, 2008 850-656-7667

Date Daytime Phone #