

L02000003162

2003 LIMITED LIABILITY COMPANY
ANNUAL BUSINESS REPORT (LBR)

4/30/2003-90178-005-\$50.00-\$50.00 *
9/26/2003-90004-030-\$50.00-\$50.00

FILED

03 DEC -2 AM 10:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

DOCUMENT # L02000003162

1. Entity Name

O.P. BUNDY LAND, LLC



Principal Place of Business

4218 18TH AVE. W.
BRADENTON FL 34205

Mailing Address

4218 18TH AVE. W.
BRADENTON FL 34205

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

01-0615801

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.
802 11TH STREET WEST
BRADENTON FL 34205

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PRESIDENT
OTTO M BUNDY
4218 18TH AVE W
BRADENTON, FL 34205

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
PATRICIA A. BUNDY
4218 18TH AVE W
BRADENTON, FL 34205

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Change ☐ Addition

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:

SIGNATURE REQUIRED

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

Date

Daytime Phone #

Otto M. Bundy 9/23/03

CR2E083 (4/03)