

LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 24, 2005 8:00 am
Secretary of State

02-24-2005 90106 044 ****50.00

DOCUMENT # L02000006634

1. Entity Name

JEN-TER LLC

DO NOT WRITE IN THIS SPACE

20015607

2. Principal Place of Business
3971 GULF SHORE BLVD N., # 1201

Suite, Apt. #, etc

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
NAPLES, FL

City & State

4. FEI Number
02-0576804

Applied For
Not Applicable

Zip
34103

Country

Zip

Country

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
FITTIPALDI, JENNIE M.

Street Address (P.O. Box Number is Not Acceptable)
3971 GULF SHORE BLVD N. #1201

City
NAPLES

FL Zip Code
34103

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.

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
MGRM
FITTIPALDI, JENNIE M
3971 GULF SHORE BLVD N., #1201
NAPLES, FL 34103-2104

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
BENDER, JENISE M
698 WESTRIDGE RD
AKRON, OH 44333

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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:

Jenise Bender

2-15-05 330 666-6813

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

Date

Daytime Phone #

CFR2003B (12/02)