## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L02000008147

1. Entity Name

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIG

DELINTZ OF JACKSONVILLE, L.L.C.



## **FILED** Feb 24, 2003 8:00 am Secretary of State 02-24-2003 90052 016 \*\*\*\*50.00

407-572-1666

			WE TW	1			
Principal Pla	ace of Business	Mailing Address		<del></del>			
5103 CONTOURA DR ORLANDO FL 32810		5103 CONTOURA DR ORLANDO FL 32810			,		
2. Principal	Place of Business	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.				184 HERE #1	O FI   O BI   10 BI
		Suite, Apr. #, etc.		☐ CHECK	HERE IF MAKING CH	ANGES	
City & State		City & State		4. FEI Number NOT	APPLICABLE		oplied For ot Applicable
Zip	Country	Zip	Country	5. Certificate of Status De		00 Ad Require	ditional
<del> </del>	6. Name and Address of Curre	nt Registered Agent		7. Name and Address of			
103	ATHERFORD, WILLIAM: P.JR 1 W. Morse Blvd., Ste 105 Iter Park Fl 32789	**************************************	Name Street Addres		tephen E. Welhouse  s (P.O. Box Dumber is Not Acceptable)  O 3 CONTOURA DRIVE		
			City	Rlands	FL	Zip Cod	e010
SIGNATURE	Signature, typed or printed name of registered age	Planne Stylke ent and title if applicable. (NOT	E: Registered Agent signature requi	use presul	est 2/19/	03	
		FILE No Make Check Payab	OW!!! FEE IS \$50.00 le to Florida Departm	0	UATE	-	, <del>, , , , , , , , , , , , , , , , , , </del>
9.		FILE No Make Check Payab	OW!!! FEE IS \$50.00	0 nent of State	CALL		
TITLE NAME STREET ADDRESS	MANAGING MEMI MGR WELHOUSE, STEPHEN E 5103 CONTOURA DR	FILE No Make Check Payab Du	OW!!! FEE IS \$50.00 le to Florida Departm e By May 1, 2003	0 nent of State	TIONS/CHANGES	Change	☐ Addition
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE THEET ADDRESS CITY-ST-ZIP	MANAGING MEMI MGR WELHOUSE, STEPHEN E	FILE No Make Check Payab Du BERS/MANAGERS	OW!!! FEE IS \$50.00 le to Florida Departme e By May 1, 2003  10.  TITLE  NAME  STREET ADDRESS	0 nent of State	TIONS/CHANGES	Change Change	☐ Addition
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