

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2003 8:00 am
Secretary of State

05-13-2003 90013 036 ****55.00

DOCUMENT # L02000011376

1. Entity Name

ROBERT BOYD ENTERPRISES L.L.C.



Principal Place of Business
**226A SOUTH STREET
NEPTUNE BEACH FL 32266**

Mailing Address
**226A SOUTH STREET
NEPTUNE BEACH FL 32266**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

75-3056380

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**A1A CORPORATE SERVICES, INC.
218 SOUTHERN COUNTRY LANE
QUINCY FL 32351**

7. Name and Address of New Registered Agent

Name **Lawrence E. Hayden, Jr. Esq.**
Street Address (P.O. Box Number is Not Acceptable)

1301 Pennman Rd.

City **Jacksonville Beach** FL Zip Code **32250**

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

Lawrence E. Hayden, Jr.

Signature typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating)

1-7-03

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRANLEY, ROBERT J 226A SOUTH STREET NEPTUNE BEACH FL 32266	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WOLFE, JAMES B 604-202 CENTRE COURT SE VERO BEACH FL 32962	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Robert J. Branley

Date

4-14-03

Daytime Phone #

**904-249
8886**

CR2E083 (10/02)