

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 15, 2003 8:00 am
Secretary of State

08-15-2003 90055 027 ****50.00

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DOCUMENT # L02000012367

1. Entity Name

COFFMAN, COLEMAN, ANDREWS & GROGAN PROPERTIES, L.L.C.



Principal Place of Business

Mailing Address

~~2065 HERSCHEL STREET~~
JACKSONVILLE FL 32204

~~2065 HERSCHEL STREET~~
JACKSONVILLE FL 32204

2. Principal Place of Business

3. Mailing Address

800 West Monroe Street

P.O. Box 40089

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

City & State

Jacksonville, FL

Zip

32202

Country

USA

Zip

32203

Country

USA

4. FEI Number

41-2038586

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COLEMAN, PATRICK D

~~2065 HERSCHEL STREET~~
JACKSONVILLE FL 32204

Name

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

800 West Monroe Street

City

Jacksonville

FL

Zip Code

32202

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

Patrick D. Coleman

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	☐ 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
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

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

Patrick D. Coleman

Date

Daytime Phone #

8/14/03 904/389-5161

CR2E083 (4/03)

Attachment

90150424

L020000/2367

Coffman, Coleman, Andrews & Grogan Properties, L.L.C.
2003 Uniform Business Report

Block 10: Additional Managing Members:

MGRM

Michael G. Prendergast
800 West Monroe Street
Jacksonville, FL 32202

MGRM

Timothy B. Strong
800 West Monroe Street
Jacksonville, FL 32202

MGRM

Heather A. Owen
800 West Monroe Street
Jacksonville, FL 32202

MGRM

Jeffrey P. Watson
800 West Monroe Street
Jacksonville, FL 32202

MGRM

Robert T. Devine
800 West Monroe Street
Jacksonville, FL 32202