

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2003 8:00 am
Secretary of State

02-26-2003 90031 025 ****50.00

DOCUMENT # L02000014513

1. Entity Name

J&J HOMES OF ORLANDO, LLC



Principal Place of Business

**8401 JR MANOR DRIVE
SUITE 100
TAMPA FL 33634**

Mailing Address

**8401 JR MANOR DRIVE
SUITE 100
TAMPA FL 33634**

2. Principal Place of Business

**6522 Gunn Hwy
Suite, Apt. #, etc.**

3. Mailing Address

**6522 Gunn Hwy
Suite, Apt. #, etc.**

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33625

Country

USA

Zip

33625

Country

USA

4. FEI Number

03-0457442

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**LYNCH, PAUL R
101 E. KENNEDY BLVD.
SUITE 2800
TAMPA FL 33602**

7. Name and Address of New Registered Agent

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 May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
MGR	suarez, Jack D	6522 Gunn Hwy	Tampa, FL 33625		
MGR	Clark, James R	6522 Gunn Hwy	Tampa, FL 33625		
MGR	Ellerbe, Mark	6522 Gunn Hwy	Tampa, FL 33625		
P	Anuszcwski, Jay	6522 Gunn Hwy	Tampa, FL 33625		
T	Rogler, Andrew L	6522 Gunn Hwy	Tampa, FL 33625		
S	Lynch, Paul R	101 E Kennedy Blvd. Ste. 2800	Tampa, FL 33602		

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

2/15/03

Date

813 982 2433

Daytime Phone #

CR2E083 (10/02)