

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2003 8:00 am
Secretary of State

03-05-2003 90301 047 ****50.00

DOCUMENT # L02000016447

1. Entity Name

MORGAN-GEORGIA PROPERTIES, L.L.C.



Principal Place of Business

Mailing Address

1120 SOUTH HUGHEY AVENUE
ORLANDO FL 32806

1120 SOUTH HUGHEY AVENUE
ORLANDO FL 32806

2. Principal Place of Business

3. Mailing Address

P.O. Box 560069

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Orlando, FL

Zip

Country

Zip

Country

32856

USA

4. FEI Number

05-0540254

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COURSEY, ROBERT S
PO BOX 56069
ORLANDO FL 32856

Name

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

1120 South Hughey Ave.

City

Orlando

FL

Zip Code

32806

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

10. ADDITIONS/CHANGES

TITLE: President
NAME: Robert S. Coursey
STREET ADDRESS: 3348 McEwan Lane
CITY-ST-ZIP: Orlando, FL 32812

TITLE: _____
NAME: _____
STREET ADDRESS: _____
CITY-ST-ZIP: _____
☐ Change ☐ Addition

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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: Robert S. Coursey

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

February 28, 2003 407-540-1115

Date

Daytime Phone #

CR2E083 (10/02)