

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000019475

1. Entity Name
TAKEMEOUTONTHTOWN, LLC



Principal Place of Business
14214 N. US HWY 27
OCALA FL 34482

Mailing Address
14214 N. US HWY 27
OCALA FL 34482

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBERTS, MARK
14214 N. US HWY 27
OCALA FL 34482

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

10. ADDITIONS/CHANGES

TITLE
NAME Member
STREET ADDRESS Bob and Jayne Savage
CITY-ST-ZIP 20 Nathan Drive
Towaco, NJ 07082 ☐ Delete

TITLE
NAME Member
STREET ADDRESS Don Larkin
CITY-ST-ZIP 2542 Columbus Ave.
Bellmore, NY 11790 ☐ Change ☐ Addition

TITLE
NAME Member
STREET ADDRESS Gerard Casey
CITY-ST-ZIP 342 Beach 146th Rd.
Neponsit, NY 11694 ☐ Delete

TITLE
NAME Member
STREET ADDRESS Amy & Krista Seltzer
CITY-ST-ZIP 5307 NW 118th Ave.
Coral Springs, FL 33076 ☐ Change ☐ Addition

TITLE
NAME Member
STREET ADDRESS Dan Hall
CITY-ST-ZIP P.O. Box 806
Versailles, KY 40383 ☐ Delete

TITLE
NAME Member
STREET ADDRESS Daniel Vella
CITY-ST-ZIP 14214 N Hwy 27
Ocala, FL 34482 ☐ Change ☐ Addition

TITLE
NAME Member
STREET ADDRESS Steven F. Thurn
CITY-ST-ZIP 2134 Nicholasville Rd
Lexington, KY 40502 ☐ Delete

TITLE
NAME Member
STREET ADDRESS John Brothers
CITY-ST-ZIP 4 Clinton Walk
Breezy Point, NY 11697 ☐ Change ☐ Addition

TITLE
NAME Member
STREET ADDRESS Bill Bressler
CITY-ST-ZIP 363 Old Tappan Rd.
Old Tappan, NJ 07675 ☒ Delete

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

TITLE
NAME Member
STREET ADDRESS James Buckley
CITY-ST-ZIP 2221 Royce St.
Brooklyn, NY 11234 ☐ Delete

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

Date

Daytime Phone #

FILED
Apr 16, 2003 8:00 am
Secretary of State

04-03-2003 90015 047 ****50.00



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number
48-1266581

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

CR2E083 (10/02)

3/4/03