2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Aug 11, 2003 8:00 am Secretary of State

1. Entity Nar	IMENT # LO20000 EAD ESTATES, L.L.C.)24599	/			07-21-200	3 90089 033 **:	**50.00	
Principal Place of Business 1520 ROYAL PALM SOUARE BLVD STE. 350 FORT MYERS FL 33919		Mailing Address 1520 ROYAL PALM SQUARE BLVD., STE. 350 FORT MYERS FL 33919			55053801				
2. Principal Place of Business		3. Mailing Address				i (i. 1914) (i . 100) (i. 1914)			
Suite, Apt. #, etc.		Suite, Apt. #, etc,			CHECK HERE IF MAKING CHANGES				
City & State		City & State		4. FEI Num 14-1	947038	├─ ─ 	Applied For	-	
Zip Country		Zip	Country		<u> </u>	e of Status Desired	\$5.00 A	dditional	7
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name en	d Address of New Re			_
ARNOLD, BOWEN A				Name					
1520 ROYAL PALM SQUARE BLVD., STE. 360 FORT MYERS FL 33919				Street Address (P.O. Box Numb	per is Not Acceptable			
				City	,		FL Zip Co	de	$\frac{1}{2}$
The above named entity submits this statement for the purpose of changing its re			<u> </u>			<u> </u>	<u> </u>	<u> </u>	4
	Signature, typed or printed name of registered agent		_	nd Agent signature required		ont, in the State of Flor	DATE		
	MANAGRU MENAGER	Make Check Payab Due By	le to Flo Septe	FEE IS \$50.00 orida Departmen mber 24, 2003	nt of State				
9.	MANAGING MEMBE	HS/MANAGERS	10.			ADDITIONS/			┨₌
TITLE NAME STREET ADDRESS CITY-ST-ZIP	National Development 1520-360 Proyec from 154 myong Fea 3391	צפ שלים		- ,	•		Change	☐ Addition	F083 (4/n3
TITLE NAME STREET ADDRESS	LEE COUNTY HOC INES TAMBAMS TRAIL N FORT MYERS, FLA		TITL NAM STRE	E IE EET ADORESS			☐ Change	Addition	8
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGINE MENS		TITLI NAM STRE	i i	,	. Territoria	☐ Change	Addition	
TITLE NAME STREET ADORESS CITY-S1-ZIP		☐ Delete	TITLE NAM STRE		<u>, , , , , , , , , , , , , , , , , , , </u>		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delcte				•	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		ŀ			☐ Change	Addition	
11. I hereby o	certify that the information supplied with	this filing does not qualify for	the exer	nption stated in Set	tion 119.07(3)	I), Florida Statutes, I f	urther certify that the	information	1

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.

IRE: SUPPLATURGER A FAMOUR EMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date

229 2758029

Daytime Phone #

attachment

MEMORANDUM

#L02000024599

FROM: Vicky

Vicky Saling

TO:

Annual Reports Section Division of Corporations

RE:

Arrowhead Estates, LLC

L02000024599

DATE:

August 5, 2003

In response to your letter dated July 23, 2003, I have completed Block 4 – our FEI Number.

Also, the following Entities are the Managing Members of Arrowhead Estates, LLC:

Managing Member National Development of America, LLC 1520-360 Royal Palm Square Blvd. Fort Myers, FL 33919

Managing Member Lee County Housing Development Corporation 1288 Tamiami Trail North Fort Myers, FL 33903

Cc: Bowen Arnold