

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

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

02-11-2003 90050 045 ****50.00

DOCUMENT # L02000024677

1. Entity Name

ISLAND KIDS SHOE COMPANY, LLC



Principal Place of Business

**1230 WEST ISLAND CLUB SQUARE
VERO BEACH FL 32963**

Mailing Address

**1230 WEST ISLAND CLUB SQUARE
VERO BEACH FL 32963**

2. Principal Place of Business

**3001 OCEAN DRIVE
SUITE 103**

3. Mailing Address

**3001 OCEAN DRIVE
SUITE 103**

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

Zip

32963

Country

Zip

32963

Country

4. FEI Number

16-1631321

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

**DOUGLASS, JEANNE
1230 WEST ISLAND CLUB SQUARE
VERO BEACH FL 32963**

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 ☐ Delete
NAME **MGRM**
STREET ADDRESS **DOUGLASS, JEANNE**
CITY-ST-ZIP **1230 WEST ISLAND CLUB SQUARE
VERO BEACH FL 32963**

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

TITLE ☐ Delete
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CITY-ST-ZIP

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: JEANNE DOUGLASS

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

2-6-03 772-234-7103

Date

Daytime Phone #

CR2E083 (10/02)