

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 12, 2003 8:00 am
Secretary of State

01-17-2003 90214 027 ****50.00
08-12-2003 90009 009 ****50.00

DOCUMENT # L02000025074

1. Entity Name

GLOBAL DEVELOPMENT COMPANY, LLC



Principal Place of Business

1398 S.W. 21ST LANE
BOCA RATON FL 33486

Mailing Address

1398 S.W. 21ST LANE
BOCA RATON FL 33486

90149936



2. Principal Place of Business

3. Mailing Address

11865 US Highway 41 South Suite, Apt. #, etc.

City & State

Gibsonton, FL

City & State

Gibsonton, FL

4. FEI Number

45-0501845

Applied For

Not Applicable

Zip

33534

Country

U.S.A.

Zip

33534

Country

U.S.A.

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

ROSETTO, BRUCE C
1398 S.W. 21ST LANE
BOCA RATON FL 33486

Name

Richard J. Schultes, Sr.

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

11865 US Highway 41 South

City

Gibsonton

FL

Zip Code

33534

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)

8-4-03

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By September 24, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE	MGRM	<input checked="" type="checkbox"/> Delete
NAME	ROSETTO, BRUCE C	
STREET ADDRESS	1398 S.W. 21ST LANE	
CITY-ST-ZIP	BOCA RATON FL 33486	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	MGRM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	August C. Schultes, III	
STREET ADDRESS	11865 US Highway 41 South	
CITY-ST-ZIP	Gibsonton, FL 33534	
TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Edward A. Schultes, Sr.	
STREET ADDRESS	11865 US Highway 41 South	
CITY-ST-ZIP	Gibsonton, FL 33534	
TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Richard J. Schultes, Sr.	
STREET ADDRESS	11865 US Highway 41 South	
CITY-ST-ZIP	Gibsonton, FL 33534	
TITLE	MGR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	James F. Schultes, Jr.	
STREET ADDRESS	11865 US Highway 41 South	
CITY-ST-ZIP	Gibsonton, FL 33534	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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:

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

8-4-03

Date

813-741-3010

Daytime Phone #

CR2E083 (4/03)