2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR) DOCUMENT # L02000026341 1. Entity Name PURDY-MAC DEVELOPMENT, LC					FILED Jul 11, 2003 8:00 am Secretary of State 07-11-2003 90026 015 ****50.00 04-28-2003 90084 033 ****50.00				
Principal Plac 5980 CLUBHOUS VERO BEACH FI		Mailing Address 5980 CLUBHOUSE DRIVE VERO BEACH FL 32967			15 851 81118 14811 18811 88111 88114 88	111 BANIS ING BAND BAND 11314 BA	LQ1 101 961		
2. Principal P	Place of Business	3. Mailing Address	<u> </u>						
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		<u> </u>		MAKING CHANGES	;		
City & Stat	le	City & State		4. FEI Num	iber 00		pplied For		
Zip	· Country	Zip	Country		1050390 te of Status Desired	5.00 Ad			
	6. Name and Address of Current	Registered Agent		7. Name ar	nd Address of New Re	Fee Require	30		
BAR 2801	AL, BARRY G RY G. SEGAL, P.A. OCEAN DRIVE, STE. 204	· · ·	Street Addr	ress (P.O. Box Num	ber is Not Acceptable)	· · · · · · · · · · · · · · · · · · ·			
VERG	9 BEACH FL 32963		City			FL Zip Cod			
8. The above	named entity submits this statement for	or the purpose of changing its	registered office or re	gistered agent, or b	oth, in the State of Flori		and accept		
Ŧ	lions of registered agent.	and title if applicable. (NOT	E: Registered Agent signature re	equired when reinstating)		DATE			
		Make Check Payab	OW!!! FEE IS \$50 le to Florida Depar v September 24, 20	tment of State					
9.			10.		ADDITIONS/C				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MCCAIN, WILLIAM F 5980 CLUBHOUSE DRIVE VERO BEACH FL 32967	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PURDY, GARY D 5980 CLUBHOUSE DRIVE VERO BEACH FL 32967	🗖 Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition		
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	Addition		
indicated	Certify that the information supplied with on this report is true and accurate and bility company or the receiver or truste bility company or the receiver or truste signature and typed on printed name of	that my signature shall have e empowered to execute this ATTE PIEOLO	the same legal effect a report as required by C	as if made under oa Chapter 608, Florida	th; that I am a managin a Statutes.	urther certify that the i g member or manage	nformation ar of the		

1. Entity Nar	MENT #(L	02000	02634	IT)	A		90	14148	6			
	IAC DEVELOPME	NI, LC										
Principal Plac	ce of Business		Mailing	Address	,L							
i980 Clubhoi Iero Beach				JBHOUSE DRIVE Ach FL 32967								
2. Principal I	Place of Business		3. Mailin	g Address		<u> </u>						
Suite, Apt	. #, etc.		Suite,	Apt. #, etc.	- <u></u>				ere if Mai	KING CHA	NGES	;
City & Sta			City &	State			4. FEI Nurr	6-10 50	390		N	pplied For ot Applicable
Zip	Count	ry	Zìp	_	Country	_	5. Certifica	te of Status Desir	ed 🗋	\$5.0 Fee F	DO Ad Require	ditional ed
······	6. Name and Add	iress of Currer	nt Registered			ame		d Address of N	w Registe	red Agent		
BAF	GAL, BARRY G RY G. SEGAL, P.A. 1 OCEAN DRIVE, S				St	treet Address ((P.O. Box Num	ber is Not Accept	able)			<u> </u>
	O BEACH FL 3296				- ci	ity		<u></u>		FL ^z	ip Cod	
	named entity submits		for the purpose	e of changing its	s registered of	flce or register	red agent, or b	oth, in the State o			ir with,	and accept
the obligat	tions of registered ager	nt.										
GNATURE	1581	6-							10 1	<u>5</u>		
BIGNATURE	Signature, typed or printed na	6-	Int and little if applicat		TE: Registered Ager		d when reinstating)	<u> </u>	10 1	<u>5</u> ve		
BIGNATURE	Signature, typed or printed na	6-]	FILE N Check Payab	OW!!! FEE	IS \$50.00 a Departme	i	<u> </u>	10 12	AT A		
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