

# LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2003 8:00 am**  
**Secretary of State**

03-12-2003 90013 002 \*\*\*\*50.00

DOCUMENT # L02000032148

1. Entity Name

ELANDE PROPERTIES, LLC



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

13129 SE 49th CT

Suite, Apt. #, etc.

3. Mailing Address

13129 SE 49th CT

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Belleview FL

City & State

Belleview FL

4. FEI Number

04-3742707

☒ Applied For

☐ Not Applicable

Zip

34420

Country

USA

Zip

34420

Country

USA

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Lowell VAN VORCE Jr

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

13129 SE 49th CT

City

Belleview

FL

Zip Code

34420

**DO NOT WRITE  
IN THIS SPACE**

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.

DATE

**FEE IS \$50.00**

**Make Check Payable to Florida Department of State  
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
Lowell VAN VORCE Jr  
13129 SE 49th CT  
Belleview FL 34420-5053

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
DIANE VAN VORCE  
13129 SE 49th CT  
Belleview FL 34420-5053

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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**DO NOT WRITE  
IN THIS SPACE**

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

*Lowell Van Vorce Jr*

Lowell VAN VORCE Jr

Date

2/10/03

Daytime Phone #

(352) 245-2225

CR2E083B (12/02)