LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

5/1/2

FILED
Jun 04, 2003 8:00 am
Secretary of State
05-01-2003 90275 038 ****50.00

DOCUMENT # L02000032650

1. Entity Name

ALCO-METAL REALTY & DEVELOPMENT, L.L.C.

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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5340 Merkin Place Suite, Apt. #, etc.	5340 Merkin Place Suite, Apt. #, etc.
City & State: New Port Richey, FL	City & State: New Port Richey, FL
Zip: 34655 Country: USA	Zip: 34655 Country: USA

4. FEI Number: 22-3887686 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Jonathan D. Moody

Street Address (P.O. Box Number is Not Acceptable): 5340 Merkin Place

City: New Port Richey FL Zip Code: 34655

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: J.D.M. Jonathan D. Moody DATE: 5-28-03
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE	MGRM
NAME	Jonathan D. Moody
STREET ADDRESS	5340 Merkin Place
CITY-ST-ZIP	New Port Richey, FL 34655
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: J.D.M. Jonathan D. Moody 4/24/03 (727) 376-6819
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083B (12/02)