

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 06, 2003 8:00 am
Secretary of State

02-06-2003 90027 008 ****50.00

DOCUMENT # L02000033799

1. Entity Name

Gemini Property Development, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

240 N. Washington Blvd.

3. Mailing Address

P.O. Box 4234

Suite, Apt. #, etc.

Suite 326

Suite, Apt. #, etc.

City & State

Sarasota, Florida

City & State

Sarasota, Florida

Zip

34236

Country

USA

Zip

34230-4234

Country

USA

4. FEI Number

22-3887739

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name **Quicker, Michael J. Esq.**

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

240 N. Washington Blvd., Suite 325

City **Sarasota**

FL

Zip Code
34236

**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

Michael J. Quicker, Esq.

Michael J. Quicker, Esq.

1/22/2003

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	TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGR Nicholas Jodhan 240 N. Washington Blvd., Suite 326 Sarasota, Florida 34236	

**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:

Nicholas Jodhan

MGR Nicholas Jodhan

1/22/2003

941-366-9730

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

Date

Daytime Phone #

CR2E083B (12/02)