

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

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90015 019 ****50.00

DOCUMENT # L02000034154

1. Entity Name

CLEVELAND & LITTLETON, L.C.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

146 Second Street North

Suite, Apt. #, etc.

Unit 302

City & State

St. Petersburg, Florida

Zip

33701

Country

U.S.A.

3. Mailing Address

146 Second Street North

Suite, Apt. #, etc.

Unit 302

City & State

St. Petersburg, Florida

Zip

33701

Country

U.S.A.

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4. FEI Number

54-2089856

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

John M. McCall

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

146 Second Street North

Unit 302

City

St. Petersburg

FL

Zip Code

33701

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

John M. McCall

Signature, typed or printed name of registered agent and title if applicable.

February 26, 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
P
John M. McCall, Jr.
146 Second Street North - Unit 302
St. Petersburg, Florida 33701

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IN THIS SPACE**

CR2E083B (12/02)

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:

John M. McCall

Signature and typed or printed name of signing managing member, manager, or authorized representative

02/26/03 (727) 823-7219

Date

Daytime Phone #