

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

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90421 007 ****50.00

DOCUMENT # L03000001484

1. Entity Name

ANA TREE LOGGING LLC



DO NOT WRITE IN THIS SPACE

24045873

2. Principal Place of Business

17425 Lake Ingram Rd.
Suite, Apt. #, etc.

3. Mailing Address

17425 Lake Ingram Rd.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Winter Garden FL

City & State

Winter Garden FL

4. FEI Number

14-1865492

Applied For

Not Applicable

Zip
34787

Country

Orange

Zip

34787

Country

Orange

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

John Ratliff

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

17425 Lake Ingram

City

Winter Garden

FL

Zip Code

34787

**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
MGR
John Ratliff
17425 Lake Ingram Rd.
Winter Garden FL 34787

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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:

John Ratliff

Date

4-13-04

Daytime Phone #

CR2E083B (12/02)