

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAR 30 PM 12:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L95000000079

1. Entity Name
MMR LIMITED COMPANY

Principal Place of Business
3870 NE SUGARHILL AVE.
JENSEN BEACH FL 34957

Mailing Address
3870 NE SUGARHILL AVE.
JENSEN BEACH FL 34957-3728



2. Principal Place of Business
2112 SW RACQUET CLUB DR.
Suite, Apt. #, etc.

3. Mailing Address
2112 SW RACQUET CLUB DR.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
PALM CITY, FLORIDA
Zip
34990
Country
USA

City & State
PALM CITY, FLORIDA
Zip
34990
Country
USA

4. FEI Number
65-0561368

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SHERMAN, ROBERT H
3870 NE SUGARHILL AVE.
JENSEN BEACH FL 34957

7. Name and Address of New Registered Agent

Name
ROBERT H. SHERMAN
Street Address (P.O. Box Number is Not Acceptable)
2112 SW RACQUET CLUB DR.
City
PALM CITY FL Zip Code
34990

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.

SIGNATURE Robert H. Sherman DATE 3/27/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
FISHER, MARILYN S
2502 FERNWOOD DR.
VIENNA VA 22180 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SHERMAN, MICHAEL D
BOX 40, MCCAFFERY RD.
ENGLISHTOWN NJ 07726 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SHERMAN, ROBERT H
3870 NE SUGARHILL AVE.
JENSEN BEACH FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
200003206372--7
-04/12/00--01088--015
*****50.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
2112 SW RACQUET CLUB DR.
PALM CITY, FLORIDA 34990 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: Robert H. Sherman
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

3/27/00 561-221-8084

Date Daytime Phone #

CR2E083 (9/99)