

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L95000000581

1. Entity Name

RIVERSIDE TITLE OF MANATEE, L.C.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 JAN 12 AM 10:47

Principal Place of Business

1001 3RD AVENUE WEST  
SUITE 600  
BRADENTON FL 34205

Mailing Address

1001 3RD AVENUE WEST  
SUITE 600  
BRADENTON FL 34205-7861

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0627239

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PRATT, JR., CHARLES J  
1001 3RD AVENUE WEST  
SUITE 600  
BRADENTON FL 34205

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9. MANAGING MEMBERS / MEMBERS

10. ADDITIONS / CHANGES

TITLE NAME ☐ Delete  
MGR PRATT, CHARLES J JR.  
STREET ADDRESS 1001 3RD AVENUE WEST, SUITE 600  
CITY- ST- ZIP BRADENTON FL 34205

TITLE NAME ☐ Change ☐ Addition  
3000003103773--9  
-01/20/00--01018--017  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY- ST- ZIP

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Charles J. Pratt, Jr.

Date

Daytime Phone #

1-4-99 941 748 7076

CR2E083 (9/99)