

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

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90012 005 ****50.00

DOCUMENT # 195060000922

1. Entity Name

New River Ranch, L.C.



DO NOT WRITE IN THIS SPACE

30047846

2. Principal Place of Business

3200 River Ranch Rd.

River Ranch FLA

3. Mailing Address P.O. Box 30019

River Ranch FLA 33867

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3352833

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

HAROLD E Megill

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

99 Long Hammock Drive

River Ranch FL 33867

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. 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	MGRM WILSON DONALD 379 Bear Trail River Ranch FLA 33867
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Megill Harold 99 Long Hammock DR River Ranch FLA 33867
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Dennis Howard 256 saddle Ln. River Ranch FLA 33867
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Petersimer, Charles 383 Gator Alley River Ranch FLA 33867
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Jones VERNON 427 Waterway DR. River Ranch FLA 33867
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ANY Mailing Send to:
Harold Megill
343 Colts Neck RD
FARMINGDALE N.J 07727
Farmingdale

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:

Harold E Megill HAROLD E Megill-MGR 3/26/03

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

Date

Daytime Phone #