

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

DOCUMENT # L97000001277

1. Entity Name

ROCKY MOUNTAIN ENTERPRISES, L.L.C.

00 JUL -6 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2. Principal Place of Business

1705 RHODE ISLAND AVE

3. Mailing Address

1705 RHODE ISLAND AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

LYNN HAVEN, FL

City & State

LYNN HAVEN, FL

4. FEI Number

59-3477349

Applied For

Not Applicable

Zip

Country

32444 USA

Zip

Country

32444 USA

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

WAHLBERG, RAYMOND E.
1705 RHODE ISLAND AVE.
LYNN HAVEN, FL 32444

7. Name and Address of New Registered Agent

Name

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

1705 RHODE ISLAND AVE.

City

LYNN HAVEN

FL

Zip Code

32444

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

Raymond E. Wahlberg

RAYMOND E. WAHLBERG, MGR, 6-28-00

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

TITLE MGR M
NAME RAYMOND E. WAHLBERG
STREET ADDRESS 1705 RHODE ISLAND AVE.
CITY-ST-ZIP LYNN HAVEN, FL 32444

☐ Delete

TITLE MGR
NAME RANDALL R. WAHLBERG
STREET ADDRESS 1705 RHODE ISLAND AVE.
CITY-ST-ZIP LYNN HAVEN, FL 32444

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ADDITIONS/CHANGES

☐ Change ☐ Addition

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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:

Raymond E. Wahlberg

RAYMOND E. WAHLBERG, MGR.

6-28-00

850-265-4096

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

Date

Daytime Phone #

CR2E083 (11/99)