

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 22, 2002 8:00 am
Secretary of State

05-22-2002 90256 047 ****55.00

DOCUMENT # L98000001472

1. Entity Name

F & S HOLDINGS, L.C.

Principal Place of Business

**247A REX PLACE
 MADEIRA BEACH FL 33708**

Mailing Address

**247A REX PLACE
 MADEIRA BEACH FL 33708**

2. Principal Place of Business

2724 WESTCHESTER DR.

Suite, Apt. #, etc.

3. Mailing Address

2724 WESTCHESTER DR. N.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Clearwater FL

City & State

2724 WESTCHESTER DR. N.

4. FEI Number

59-3528376

Applied For

Not Applicable

Zip
33761

Country

Pinellas

Zip

33761

Country

Pinellas

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

**STROHMEIER, KIRK
 247A REX PLACE
 MADEIRA BEACH FL 33708**

Name

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

2724 WESTCHESTER DR. N.

City

Clearwater

FL

Zip Code

33761

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.

Kirk Strohmeyer

(NOTE: Registered Agent signature required when reinstating)

5/1/02

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Department of State
 Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 STROHMEIER, KIRK
 247A REX PLACE
 MADEIRA BEACH FL 33708** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**2724 WESTCHESTER DR. N.
 Clearwater FL 33761** ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**MGRM
 FARMER, GEORGIA
 247A REX PLACE
 MADEIRA BEACH FL 33708** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**2724 WESTCHESTER DR. N.
 Clearwater FL 33761** ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
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☒ Change ☐ Addition

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 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:

Kirk Strohmeyer

5/1/02

727-733-7586

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

Date

Daytime Phone #

CR2E083 (9/01)