

# 2000 UNIFORM BUSINESS REPORT (UBR)

0010282 AF

DOCUMENT # L98000002099

1. Entity Name  
SUNSTATE HOME INSPECTION SERVICES L.L.C.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 FEB 29 PM 1:42

Principal Place of Business  
3145 N.W. 46TH AVENUE  
GAINESVILLE FL 32605

Mailing Address  
3145 N.W. 46TH AVENUE  
GAINESVILLE FL 32605-3647



2. Principal Place of Business  
3556 NW 21<sup>ST</sup> PL  
Suite, Apt. #, etc.

3. Mailing Address  
3556 NW 21<sup>ST</sup> PL  
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
GAINESVILLE, FL  
Zip  
32605  
Country  
ALACHUA

City & State  
GAINESVILLE, FL  
Zip  
32605  
Country  
ALACHUA

4. FEI Number  
262-23-9335

APPLIED FOR  
☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

SUMMERLIN, JEFF  
3145 N.W. 46TH AVENUE  
GAINESVILLE FL 32605

7. Name and Address of New Registered Agent

Name  
RONNIE GRUNDSET  
Street Address (P.O. Box Number is Not Acceptable)  
3556 N.W. 21<sup>ST</sup> PL  
City  
GAINESVILLE, FL  
Zip Code  
32605

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 *Jeff Summerlin* JEFF SUMMERLIN

01/04/00  
DATE

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 SUMMERLIN, JEFF 3145 N.W. 46TH AVENUE GAINESVILLE FL 32605	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS / CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	OWNER JEFF SUMMERLIN 3556 N.W. 21 <sup>ST</sup> PL GAINESVILLE, FL 32605	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RONNIE GRUNDSET 3556 N.W. 21 <sup>ST</sup> PL GAINESVILLE, FL 32605	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Jeff Summerlin* JEFF SUMMERLIN

01/04/00

352 538-4971  
Daytime Phone #