## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 28, 2002 8:00 am Secretary of State DOCUMENT # L98000002266 1. Entity Name 03-28-2002 90006 030 \*\*\*\*50.00 GRAND LAKE RV RESORT, L.L.C. Principal Place of Business Mailing Address 2922 CARDINAL DRIVE 2922 CARDINAL DRIVE VERO BEACH FL 32963 VERO BEACH FL 32963 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-0871555 Not Applicable Zip Country Country Zip \$5.00 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SCHAUB, RICHARD G JR Street Address (P.O. Box Number is Not Acceptable) 2922 CARDINAL DRIVE VERO BEACH FL 32963 Zip Code City 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 Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES 9. MGRM (9/01 TITLE ☐ Addition TITLE ☐ Delete Change SCHAUB, RICHARD G JR. NAME NAME **CR2E083** STREET ADDRESS STREET ADDRESS 2922 CARDINAL DRIVE CITY-ST-ZIP CITY-ST-ZIP VERO BEACH FL 32963 ☐ Delete ☐ Addition TITLE TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition -- Delete Change TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C!TY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE □ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change TITLE ☐ Defete TITLE Addition NAME NAME STREET ADDRESS TREET ADDRESS

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 pasted empowered to exacute this report as required by Chapter 608, Florida Statutes.

CITY-ST-ZIP

SIGNATURE: NAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CITY-ST-ZIP

FILED