

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002350

1. Entity Name

SEA COAST WINDOW & DOOR, LLC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 24 AM 9:41

Principal Place of Business

609 SIESTA KEY CIRCLE, #3412
DEERFIELD BEACH FL 33441

Mailing Address

609 SIESTA KEY CIRCLE, #3412
DEERFIELD BEACH FL 33441-7729



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0871241

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HARVAN, DAVID M ESQ.
40 NORTHEAST 7TH AVENUE
DELRAY BEACH FL 33483

7. Name and Address of New Registered Agent

Name

Smith, Dennis C.

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

609 Siesta Key Circle

#3412

City

Deerfield Beach

FL

Zip Code
33441

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

Dennis Smith

2-17-00

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

3/17/00

9. MANAGING MEMBERS/MEMBERS

TITLE NAME MGRM
NAME SMITH, DENNIS C
STREET ADDRESS 609 SIESTA KEY CIRCLE, #3412
CITY-ST-ZIP DEERFIELD BEACH FL 33441

☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE NAME
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☐ Delete

TITLE NAME
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☐ 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:

Dennis Smith

2-17-00

954-429-4578

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

Date

Daytime Phone #

CR2E083 (9/99)