

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002677

1. Entity Name  
BAILEY & KURTZ II, LLC

Principal Place of Business

C/O KURTZ HOMES, INC. ATTN: RANDY KURTZ  
3884 PROGRESS AVENUE  
NAPLES FL 34104

Mailing Address

C/O KURTZ HOMES, INC. ATTN: RANDY KURTZ  
3884 PROGRESS AVENUE  
NAPLES FL 34104-3648

FILED

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA



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

DO NOT WRITE IN THIS SPACE

APPLIED FOR

Applied For

Not Applicable

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

KURTZ, RANDY

3884 PROGRESS AVE.  
NAPLES FL 34104

Name

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

City

FL

Zip Code

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MGRM  
STREET ADDRESS BAILEY, RALPH  
CITY- ST- ZIP 695 EAST MAIN STREET  
STAMFORD CT 06901

TITLE NAME  
STREET ADDRESS  
CITY- ST- ZIP  
300003205053--3  
-04/12/00--01009--007  
\*\*\*\*\*55.00 \*\*\*\*\*55.00

TITLE NAME MGRM  
STREET ADDRESS KURTZ HOMES, INC.  
CITY- ST- ZIP 3884 PROGRESS AVENUE  
NAPLES FL 34104

TITLE NAME  
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CITY- ST- ZIP

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:

*Randy Kurtz*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

2/16/2000  
Date

941 643-4455  
Daytime Phone #

CR2E083 (9/99)