

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000003462

1. Entity Name
THOMPSON-NOLENSVILLE, LLC

Principal Place of Business
121 WEST FORSYTH STREET, SUITE 200
JACKSONVILLE FL 32202

Mailing Address
121 WEST FORSYTH STREET, SUITE 200
JACKSONVILLE FL 32202

2. Principal Place of Business

3. Mailing Address
200 Laura Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Jacksonville, FL

Zip

Country

32202

Country

4. FEI Number 59-3531759

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

F & L CORP.
200 LAURA STREET
JACKSONVILLE FL 32202-3520

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
MGR
REGENCY REALTY GROUP, INC.
STREET ADDRESS
121 WEST FORSYTH STREET, SUITE 200
CITY-ST-ZIP
JACKSONVILLE FL 32202 ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition
300004084293--0
-04/27/01--01035--003
1967.50 **50.00

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE NAME
STREET ADDRESS
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.

By Regency Realty Group, Inc.

SIGNATURE: *Kathy Dean* Kathy Dean, AVP

April 10, 2001

904-598-7471

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

Date

Daytime Phone #

0002470 AF

CR2E083 (11/00)

