

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

04-22-2002 90239 015 \*\*\*\*50.00

**DOCUMENT # L99000000560**

1. Entity Name

**JOURNEY'S INN 45TH STREET, LLC**

Principal Place of Business

Mailing Address

~~1230 FAIRVIEW LANE~~  
~~RIVIERA BEACH FL 33404~~

~~1230 FAIRVIEW LANE~~  
~~RIVIERA BEACH FL 33404~~

**943436**

2. Principal Place of Business

3. Mailing Address

**1025 N. Federal Hwy.**  
 Suite, Apt. #, etc.

**1025 N. Federal Hwy.**  
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

City & State

**Lake Park, FL**

**Lake Park, FL**

Zip

Country

Zip

Country

**33403**

**33403**

4. FEI Number

**65-0891287**

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

~~DIAMOND, LAWRENCE J.~~  
~~ACKERMAN, LINK & SARTORY, P.A.~~  
~~222 LAKEVIEW AVENUE, STE 1250~~  
~~WEST PALM BEACH FL 33401~~

Name **Douglas A. Holder, Jr.**  
 Street Address (P.O. Box Number is Not Acceptable)  
**1025 N. Federal Hwy.**  
 City **Lake Park, FL** Zip Code **33403**

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**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE **MGR** ☐ Delete  
 NAME **HOLDER, DOUGLAS A JR**  
 STREET ADDRESS ~~1230 FAIRVIEW AVE~~  
 CITY-ST-ZIP ~~RIVIERA BEACH FL 33404~~

TITLE ☒ Change ☐ Addition  
 NAME  
 STREET ADDRESS **1025 N. Federal Hwy.**  
 CITY-ST-ZIP **Lake Park, FL 33403**

TITLE **MGR** ☐ Delete  
 NAME **WATTS, LARRY V**  
 STREET ADDRESS **1230 FAIRVIEW AVE**  
 CITY-ST-ZIP **RIVIERA BEACH FL 33404**

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

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

**Douglas A. Holder, Jr.** **04/13/02** **(561) 840-9256 ext. 290**

CR2E083 (9/01)