2000 UNIFORM BUSINESS REPORT (UBR)

	MENT # L9900	0000622		(02,		•			
1. Entity Name GRUBBS-RUTLAND BUILDERS, L.C.						FILED			
						00 JUN 15 PM 4: 20			
Principal Place of Business Mailing Address									
400 GULF BREEZE PARKWAY, SUITE 201 P.O. BOX 727 GULF BREEZE FL 32561 GULF BREEZE FL 32562-073						SECRETARY OF STATE TALEAHASSEE, FLORIDA			
					التعنية. التعنية إلى	THE TRANSPORT OF THE PROPERTY			
Principal Place of Business 3. Mailing Address									
Same	Same								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	iuite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State	е	City & State	City & State			4. FEI Number 59–3561375 Applied For Not Applicable			
Zip Country		Zip	Zip Country			5. Certificate of Status Desired \$5.00 Additional Fee Required			
	6. Name and Address of Current	Registered Agent		_Nome		and Address of New I	Registered Agent	یہ کرچند در	
GRUBBS, WILLIAM J JR.				Street Address (P.O. Box Number is Not Acceptable)					
400 GULF BREEZE PARKWAY, SUITE 201						amper is not wecehigor		· <u>-</u> .	
GULF BREEZE FL 32561							P1 7:~ (Code	
				City		FL Zip Code			
8. The above	named entity submits this statement of	r the purpose of changing it	ts register	ed office or req	gistered agent, o	or both, in the State of Fl			
SIGNATURE Signature, typed or printed hame of registated appropriate if applicable. (NOTE: Re				stered Agent signature required when reinstating)		ng)	5/1/00 DATE		
	()	FILE:N							
		Make Check P							
9.	MANAGING MEMB	ERS/MEMBERS	10.			ADDITIONS	/CHANGES		
INTE	MGRM	Deleta	TITL	1			Char	ge Addition	
NAME STREET ADDRESS	GRUBBS, WILLIAM J JR. 400 GULF BREEZE PARKWAY, SUITE 201			AE EET ADDRE88					
ÇITY- \$T- ZIP	GULF, BREEZE FL 32561			r-81-ZIP				-	
TITLE	MGRM Delete RUTLAND, JAMES W 111			.E AÉ		40000	 	ge Addition	
STREET ADDRESS	4142 CARMICHAEL COURT			EET ADORESS		40000 -06/2 ****	21/000106 **<0 00 ***	7004 ***50 00	
CITY-8T-ZIP	MONTGOMERY AL 36106			E et ausse and the		The state of the s		ge Addition_	
WAME		· <u>—</u>	NAN	AE EET ADDRESS		-			
STREET ADDRESS CITY-ST-ZIP				r-81-ZIP					
TITLE		☐ Delete	TITL	1		·	Char	ge 🔲 Addition	
NAME STREET ADDRESS				EET ADDRESS					
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TITLE		☐ Deleto	TITL	1			Char	nge 🗌 Addition	
NAME ST <u>re</u> et address			MAN STR	AE EET ADDRESS			•		
CITY-ST-ZIP				r-ST-ZIP		240V() F 111 O 11	1 & mathematical and the second	ho information	
 I hereby of indicated limited lia 	certify that the information supplied with on this report is true and accurate and bility company or the receiver or truster	n this filing does not qualify that my signature shall have e empowered to execute ini-	or the exe e the sam s report a	emption stated e legal effect a repaired by 0	in Section 119.0 as if made under Chapter 608, Flo	য়/(এ)(I), Florida Statutes. coath; that I am a mana rida Statutes.	Trurther certify that t ging member or man	nager of the	
0101:	(//s/s//ken	THE ANNUA	/sh				5/1/00		
SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNANG MANAGING REMBER OR MANAGER						Date	Daytime Phor	ne #	