2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L9900000664					FILED				
1400 MAYPORT ROAD, L.L.C.			s ·	\ *•	OLMAYII	t			
Principal Plac		Mailing Address	ailing Address 5 NORTH ROSCOE BOULEVARD		SECRETARY OF STATE TALLAHASSEE, FLORIDA				
1400 MAYPORT ROAD 55 NORTH ROSCOE BOULEVARD ATLANTIC BEACH FL 32233 PONTE VEDRA BEACH FL 32082-3625					I NAMERIA AND ANTON IN HE NEED RAIN A	ÁRIN BONG A	11 NG 11 11 11 11 11 11 11 11 11 11 11 11 11	ACH ANN IADI	
2. Principal Place of Business 3. M		3. Mailing Address	Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		DO NOT WRITE	IN THIS S	SPACE		
City & State		City & State	Sity & State		4. FEI Number				
Zip	Country	Zip	Country	5. Certif	icate of Status Desired		\$5.00 Add Fee Required	litional d	
	6. Name and Address of Current F	Registered Agent	Name	7. Name	and Address of New Reg	istered A	(gent	,	
LYNCH, K			Street Address	ress (P.O. Box Number is Not Acceptable)					
	H ROSCOE BOULEVARD EDRA BEACH FL 32082) ·				! !			
			City			FL	Zip Code	Э	
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					•				
9.	MANAGING MEMBE	RS/MEMBERS	10.		ADDITIONS/CH	HANGES			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LYNCH, KIRT 55 NORTH ROSCOE BOULEVARD PONTE VEDRA BEACH FL 32082		TITLE NAME STREET ADDRESS CITY-ST-ZIP		,		☐ Change	☐ Addition	
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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.									