

2001 UNIFORM BUSINESS REPORT (UBR)

0020215 AF

DOCUMENT # L99000000700

1. Entity Name
WINN DIXIE GROVE, L.C.

Principal Place of Business: **7731 BOCILLA LANE, SUITE 12 BOKEELIA FL 33922**

Mailing Address: **7731 BOCILLA LANE, SUITE 12 BOKEELIA FL 33922**


2. Principal Place of Business: Suite, Apt. #, etc.

3. Mailing Address: Suite, Apt. #, etc.

City & State

Zip Country

FILED
01 APR 16 PM 3: 11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA.



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0932707** Applied For Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
WEINTRAUB, RUSSELL
7731 BOCILLA LANE, SUITE 12
BOKEELIA FL 33922

7. Name and Address of New Registered Agent
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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

100004065281--9
--04/24/01--01110--003
*******50.00 *****50.00**

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WEINTRAUB, RUSSELL 7731 BOCILLA LANE, SUITE 12 BOKEELIA FL 33922 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *[Signature]* **Russell Weintraub** **4/13/01**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (11/00)