

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000001169

1. Entity Name

PARKER ENTERPRISES-SHERIDAN, LLC

FILED

01 JAN 26 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

2321 N.E. 34 COURT
LIGHTHOUSE POINT FL 33064

Mailing Address

~~2321 N.E. 34 COURT~~
~~LIGHTHOUSE POINT FL 33064~~

new address

2. Principal Place of Business

3. Mailing Address

Jim & Linda Parker

Suite, Apt. #, etc.

2196 Country Club Blvd.

Deercreek

City & State

Deerfield Bch., FL 33442

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

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

PARKER, JAMES

~~2321 N.E. 34 COURT~~
~~LIGHTHOUSE POINT, FL 33064~~

new
Jim & Linda Parker
2196 Country Club Blvd.
Deercreek
Deerfield Bch., FL 33442

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 ☐ Delete
MGRM PARKER, JAMES
STREET ADDRESS 2321 N.E. 34 COURT
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE NAME ☐ Delete
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TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

James A. Parker

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

Date

Daytime Phone #

1/16/01 954-698-6603

CR2E083 (11/00)