

# 2001 UNIFORM BUSINESS REPORT (UBR)

0002120 AF

DOCUMENT # L99000002175

1. Entity Name  
EMBASSY INVESTMENT, III, LLC

Principal Place of Business  
3401 S. ORLANDO AVENUE  
SANFORD FL 32771

Mailing Address  
444 SEABREEZE BLVD., SUITE 200  
DAYTONE BEACH FL 32118

FILED

01 APR 23 PM 2:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3575841

Applied For

Not Applicable

Zip

Country

Zip

Country

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

BORNS, LAWRENCE W ESQ.  
412 NORTH HALIFAX AVENUE  
DAYTONE BEACH FL 32118

Name

Manoj Bhoola

Street Address (P.O. Box Number is Not Acceptable)

444 Seabreeze Blvd., Ste. 200

City

Daytona Beach

FL

Zip Code

32118

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]*

MANOJ BHoola

4.17.01

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  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
BHoola, MOHAN J  
444 SEABREEZE BLVD., SUITE 200  
DAYTONE BEACH FL 32118 ☐ Delete

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.

SIGNATURE:

*[Signature]* MANOJ BHoola

4.17.01

386-255-2577

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

Date

Daytime Phone #

CR2E083 (11/00)