

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90108 041 \*\*\*\*50.00

**DOCUMENT # L99000002275**

1. Entity Name

**FLORIDA DEVELOPMENT PARTNERS, L.C.**



Principal Place of Business

Mailing Address

**5692 STRAND COURT  
STE 1  
NAPLES FL 34110**

**5692 STRAND COURT  
STE 1  
NAPLES FL 34110**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0956711**

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

**NAPLES-LAWDOCK, INC.  
4501 TAMiami TRAIL NORTH  
STE. 300  
NAPLES FL 34103**

Name **Kevin G. Coleman, Esq.**  
**Goodlette Coleman & Johnson, P.A.**  
Street Address (P.O. Box Number is Not Acceptable)  
**4001 Tamiami Trail N., Suite 300**

City **Naples** **FL** Zip Code **34103**

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State**  
**Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME **MGRM**  
**HARDY, PAUL** ☒ Delete  
STREET ADDRESS **5692 STRAND COURT, STE 1**  
CITY-ST-ZIP **NAPLES FL 34110**

TITLE  
NAME **MGRM** ☒ Change ☐ Addition  
**Stock Development, L.L.C.**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME **MGRM** ☒ Delete  
**TOLSON, RENEE**  
STREET ADDRESS **5692 STRAND COURT, STE 1**  
CITY-ST-ZIP **NAPLES FL 34110**

TITLE  
NAME **P.** ☒ Change ☐ Addition  
**Brian K. Stock**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME **VP** ☐ Change ☒ Addition  
**K.C. Stock**  
STREET ADDRESS **5692 Strand Court**  
CITY-ST-ZIP **Naples, FL 34110**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME **VP** ☐ Change ☒ Addition  
**Brad Black**  
STREET ADDRESS **5692 Strand Court**  
CITY-ST-ZIP **Naples, FL 34110**

TITLE  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

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

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

Date

Daytime Phone #

CR2E083 (10/02)