

# 2001 UNIFORM BUSINESS REPORT (UBR)

0027560 AF

DOCUMENT # **L99000002444**

1. Entity Name  
**BREEZY ISLAND, L.L.C.**

Principal Place of Business

**1430 WYNNTON ROAD  
COLUMBUS GA 31906**

Mailing Address

**1430 WYNNTON ROAD  
COLUMBUS GA 31906**

**FILED**  
**01 APR 16 PM 3:11**  
**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

**58-2463116**

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

**TARKOW, STANLEY A  
511 BAY STREET, SUITE 309  
TAMPA FL 33606**

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**

**200004036712--8**  
**-04/20/01--0118--020**  
**\*\*\*\*\*50.00 \*\*\*\*\*50.00**

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME ☒ Delete  
**MGR WYNNTON CAPITAL PARTNERS, L.P.**  
STREET ADDRESS  
**1430 WYNNTON ROAD**  
CITY-ST-ZIP  
**COLUMBUS GA 31906**

TITLE NAME ☒ Change ☐ Addition  
**MGR WCP HOLDINGS, L.L.C.**  
STREET ADDRESS  
**1430 WYNNTON ROAD**  
CITY-ST-ZIP  
**COLUMBUS, GA 31906**

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:

*Stanley A. Tarkow*

TREASURER

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

2/14/01

706/322-2914

CR2E083 (11/00)