

# 2000 UNIFORM BUSINESS REPORT (UBR)

AND  
FILED

00 MAY 25 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L99000002481

1. Entity Name

NEPTUNE HENDERSON MANAGEMENT, L.C.

Principal Place of Business

4922 S. MELROSE AVENUE  
TAMPA FL 33629

Mailing Address

4922 S. MELROSE AVENUE  
TAMPA FL 33606-3322



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

120 Baltic Circle

3. Mailing Address

120 Baltic Circle

Suite, Apt. #, etc.

Tampa

Suite, Apt. #, etc.

City & State

Florida

City & State

Tampa Florida

Zip

33606

Country

Zip

33606

Country

4. FEI Number

59-3642929

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

EICHOLTZ, KIRK D.

3001 N. ROCKY POINT DRIVE EAST, SUITE 200  
TAMPA FL 33607

7. Name and Address of New Registered Agent

Name

Joel W. Brewer

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

120 Baltic Circle

City

Tampa FL 33606

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

*Joel W. Brewer*

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

TITLE NAME MGRM BREWER, JOEL W. ☐ Delete  
STREET ADDRESS 4922 S. MELROSE AVENUE  
CITY-ST-ZIP TAMPA FL 33629

TITLE NAME MGRM GROSSMAN, KENNETH ☐ Delete  
STREET ADDRESS 4922 S. MELROSE AVENUE  
CITY-ST-ZIP TAMPA FL 33629

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

TITLE NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME ☒ Change ☐ Addition  
STREET ADDRESS 120 Baltic Circle  
CITY-ST-ZIP Tampa, FL 33606

TITLE NAME ☒ Change ☐ Addition  
STREET ADDRESS 120 Baltic Circle  
CITY-ST-ZIP Tampa, FL 33606

TITLE NAME ☐ Change ☐ Addition  
STREET ADDRESS 300003289923-6  
CITY-ST-ZIP -06/14/00-01113-018  
\*\*\*\*\*50.00 \*\*\*\*\*50.00

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

TITLE NAME ☐ Change ☐ Addition  
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:

*Joel W. Brewer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

MGRM

Date

Daytime Phone #

CR2E003 (3/99)