

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000004503

1. Entity Name

PEACE RIVER STATION, L.L.C.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -7 PM 2:09

Principal Place of Business

163 EAST MOORE BLVD., STE 200
WINTER PARK FL 32789

Mailing Address

163 EAST MOORE BLVD., STE 200
WINTER PARK FL 32789-7415

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ 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

WHITING JR, MACAULEY
163 EAST MORSE BLVD., STE 200
WINTER PARK FL 32789

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

Macaulay Whiting Jr

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/3/2000

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
NATIONS ENERGY CORPORATION
STREET ADDRESS 399 CAROLINA AVENUE
CITY-ST-ZIP WINTER PARK FL

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP
000003132120--1
-02/11/00--01014--014
*****50.00 ☐ Change ☐ Addition

TITLE NAME ☐ Delete
MGRM
DECKER ENERGY-PEACE RIVER, INC.
STREET ADDRESS 163 EAST MORSE BLVD., STE 200
CITY-ST-ZIP WINTER PARK FL

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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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 OR MANAGER

Macaulay Whiting Jr

2/3/2000

DATE

Daytime Phone #

407 628-8900

CR2E083 (9/99)