

2000 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # L99000004787

1. Entity Name
J & M PROPERTIES OF APOLLO BEACH, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 14 PM 2:23

Principal Place of Business
907 BUNKER VIEW DRIVE
APOLLO BEACH FL 33572

Mailing Address
907 BUNKER VIEW DRIVE
APOLLO BEACH FL 33572-2813



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3604537

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

FISHER, LOUIS
907 BUNKER VIEW DRIVE
APOLLO BEACH FL 33572

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MGRM FISHER, LOUIS
STREET ADDRESS 907 BUNKER VIEW DRIVE
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE NAME MGRM FISHER, LINDA DARLENE
STREET ADDRESS 907 BUNKER VIEW DRIVE
CITY-ST-ZIP APOLLO BEACH FL 33572

TITLE NAME
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CITY-ST-ZIP

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TITLE NAME
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TITLE NAME
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CITY-ST-ZIP

TITLE NAME
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

Date

Daytime Phone #

2-3-00 (813) 641-3353

CR2E083 (9/99)