

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

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AF

DOCUMENT # L99000004797

1. Entity Name
TRAWICK HOLDINGS, LLC

00 APR -3 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ny 4/18



DO NOT WRITE IN THIS SPACE

Principal Place of Business

1555 SOUTH BLVD.
CHIPLEY FL 32428

Mailing Address

1555 SOUTH BLVD.
CHIPLEY FL 32428-1626

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Chipley FL

4. FEI Number

59-3590734

Applied For

Not Applicable

Zip

Country

Zip

32428

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

TRAWICK, JAMES L
1555 SOUTH BLVD.
CHIPLEY FL 32428

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 MGR
STREET ADDRESS TRAWICK, JAMES L
CITY-ST-ZIP 1555 SOUTH BLVD
CHIPLEY FL

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP
600003219526--7
-04/24/00--01023--009
*****50.00 *****50.00

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR
STREET ADDRESS JAMES J TRAWICK
CITY-ST-ZIP 1693 HWY 277
CHIPLEY, FL 32428

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR
STREET ADDRESS JENEE T FLOYD
CITY-ST-ZIP 1902 LIMESTONE LANE
CHIPLEY, FL 32428

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR
STREET ADDRESS P CARLOS TRAWICK
CITY-ST-ZIP 1839 SWEET BAY RD
CHIPLEY, FL 32428

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR
STREET ADDRESS DOUGLAS H TRAWICK
CITY-ST-ZIP 1620 CANDY KITCHEN
CHIPLEY FL 32428

TITLE NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGR
STREET ADDRESS KENNETH W TRAWICK
CITY-ST-ZIP 1850 LASTER RD
CHIPLEY, FL 32428

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: Jeneet T Floyd
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

3-13-2000

850-638-0429

Date

Daytime Phone #

CR2E083 (9/99)