

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90388 013 ****50.00

DOCUMENT # L990000005578

1. Entity Name

West Florida Realty, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

501 Goodlette Rd N

Suite, Apt. #, etc.

D100

City & State

Naples FL

Zip

34102

Country

Collier

3. Mailing Address

501 Goodlette Rd N

Suite, Apt. #, etc.

D100

City & State

Naples FL

Zip

34102

Country

Collier

4. FEI Number

650950528

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Raymond J. Bowie

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

900 6th Ave South #104

City

Naples

FL

Zip Code

34102

**DO NOT WRITE
IN THIS SPACE**

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.

DATE

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Mgrm
Mary E. West
1835 Kingfish Rd
Naples, FL 34102

TITLE
NAME
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IN THIS SPACE**

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: Mary E. West

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

(239) 774-4651
4-30-02 (941) 564-6245

Date

Daytime Phone #