

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

L99000006122

1. Entity Name

LDG QW-J39, LLC

Principal Place of Business

Mailing Address

2. Principal Place of Business c/o

Landmark Development Group

3. Mailing Address c/o

Landmark Development Group

Suite, Apt. #, etc.

5668 Strand Court, #108

Suite, Apt. #, etc.

5668 Strand Court, #108

City & State

Naples, FL

City & State

Naples, FL

Zip

34110

Country

US

Zip

34110

Country

US

4. FEI Number

65-0972772

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

FILED

01 MAY -1 PM 5:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6. Name and Address of Current Registered Agent

CLASP Inc.

3001 Tamiami Trail North, 4th Floor

Naples, FL 34103

7. Name and Address of New Registered Agent

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.

(NOT: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

100004274911--8
-05/21/01--01187--006
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE MGR ☐ Delete
NAME Landmark Development Group, LLC
STREET ADDRESS 5668 Strand Court, #108
CITY-ST-ZIP Naples, FL 34110

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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.

Landmark Development Group, LLC, Manager

SIGNATURE:

By:

Arthur Shafran, its Manager

941-597-8400

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

Date

Daytime Phone #