

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000006357

1. Entity Name

THE PRESERVE AT ROLLING OAKS, L.C.

Principal Place of Business

2873 LaConcha Drive
Clearwater, FL 33762

Mailing Address

2873 LaConcha Drive
Clearwater, FL 33762

2. Principal Place of Business

1520 Gulf Boulevard
Suite, Apt. #, etc.

Unit #1806

City & State
Clearwater, FL

Zip
33767

Country
USA

3. Mailing Address

1520 Gulf Boulevard
Suite, Apt. #, etc.

Unit #1806

City & State
Clearwater, FL

Zip
33767

Country
USA

4. FEI Number

59-3607527

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

A.R. Neal
2873 LaConcha Drive
Clearwater, FL 33762

7. Name and Address of New Registered Agent

Name

Gerry D. Minear

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

1520 Gulf Boulevard

Unit #1806

City

Clearwater

FL

Zip Code
33767

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.

Gerry D. Minear - Manager

(NOTE: Registered Agent signature required when reinstating)

4/6/00

DATE

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

9. MANAGING MEMBERS/MEMBERS

TITLE	Manager	<input checked="" type="checkbox"/> Delete
NAME	A.R. Neal	
STREET ADDRESS	2873 LaConcha Drive	
CITY-ST-ZIP	Clearwater, FL 33762	
TITLE	Manager	<input type="checkbox"/> Delete
NAME	Gerry D. Minear	
STREET ADDRESS	1520 Gulf Boulevard, Unit #1806	
CITY-ST-ZIP	Clearwater, FL 33767	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	Manager	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Al Ross	
STREET ADDRESS	2674 McMullen Booth Road, Unit #1122	
CITY-ST-ZIP	Clearwater, FL 33761	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Gerry D. Minear

4/6/00

Date

727-469-8710

Daytime Phone #

CR2E083 (11/99)