

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000006967

1. Entity Name

REDLINE INVESTMENT GROUP, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JUN 14 PM 2:23

Principal Place of Business

111 N. ORANGE AVENUE, 20TH FLOOR
ORLANDO FL 32801

Mailing Address

111 N. ORANGE AVENUE, 20TH FLOOR
ORLANDO FL 32801-2316

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FFI Number
59-3604143

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EVORA, ORLANDO L
111 N. ORANGE AVENUE, 20TH FLOOR
ORLANDO FL 32801

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

BLT

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MANAGER
ORLANDO L. EVORA
1626 SPRING LAKE DRIVE
ORLANDO, FL 32804

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

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MANAGER
DAVID S. OLIVER
437 Silver Dew St.
Lake Mary, FL 32746

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
☐ Change ☐ Addition
800003298948-7
-06/21/00--01048--013
*****50.00 *****50.00

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
MANAGER
RANDOLPH H. FIELDS
1237 Windsong Rd.
Orlando, FL 32809

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

TITLE
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STREET ADDRESS
CITY- ST- ZIP
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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 REQUIRED
ORLANDO L. EVORA

4/28/00

407-420-1000

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

Date

Daytime Phone #