

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000008105

1. Entity Name  
E-TECH, L.L.C.

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
4040 WOODCOCK DRIVE, SUITE 230  
JACKSONVILLE FL 32207

Mailing Address  
4040 WOODCOCK DRIVE, SUITE 230  
JACKSONVILLE FL 32207-2741



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3609392

Applied For

Not Applicable

Zip

Country

Zip

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

PATRICK, MARK  
4040 WOODCOCK DRIVE, SUITE 230  
JACKSONVILLE FL 32207

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	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	MGRM	R-TECH ENTERPRISES, INC.	3862 BURNETT PARK ROAD JACKSONVILLE FL 32257				
	MGRM	L-TECH ENTERPRISES, INC.	12242 SPINEY RIDGE DRIVE SOUTH JACKSONVILLE FL 32225				
	MGRM	S-TECH, INC.	1521 STARWAN ROAD EAST JACKSONVILLE FL 32211				
	MGRM	K-TECH, INC.	12078 CRANEFOOT DRIVE JACKSONVILLE FL 32223				
	MGRM	D-TECH ENTERPRISES, INC.	12078 CRANEFOOT DRIVE JACKSONVILLE FL 32223				
	MGRM	M-TECH ENTERPRISES, INC.	1264 MUNDY DRIVE JACKSONVILLE FL 32207				

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:

Sandra K Baczinski  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

(904) 630-2713

1-12-2000