

2000 UNIFORM BUSINESS REPORT (UBR)

AND
FILED

00 APR 28 AM 11:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L99000008620

1. Entity Name
COMMONWEALTH MANAGEMENT GROUP, L.L.C.

Principal Place of Business

Mailing Address

2. Principal Place of Business
814 A1A

Suite, Apt. #, etc.
SUITE 300

City & State
PONTE VEDRA BCH, FL

Zip
32082

Country

3. Mailing Address
814 A1A

Suite, Apt. #, etc.
SUITE 300

City & State
PONTE VEDRA BCH, FL

Zip
32082

Country

4. FEI Number
59-3613161

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
DENNIS L. BLACKBURN
6620 SOUTHPOINT DR. S.
SUITE 200
ACKSONVILLE, FL 32216

7. Name and Address of New Registered Agent

Name

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

City

FL Zip Code

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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

MANAGING MEMBERS/MEMBERS	
MANAGING MEMBER RANDY B. STECK 814 A1A, SUITE 300 PONTE VEDRA BCH FL 32082	☐ Delete
MANAGING MEMBER ALAN H. ANDERSON 814 A1A, SUITE 300 PONTE VEDRA BCH FL 32082	☐ Delete
MANAGING MEMBER FRANCIS X. KEAVENEY 814 A1A, SUITE 300 PONTE VEDRA BCH FL 32082	☐ Delete
MANAGING MEMBER WILLIAM F. SWEENEY 814 A1A, SUITE 300 PONTE VEDRA BCH FL 32082	☐ Delete

10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

I 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 in 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 of the company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

CR2E083 (11/99)