

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90695 027 ****50.00

DOCUMENT # L99000009157

1. Entity Name

DAJ'S LAND O' LAKES, L.L.C.



Principal Place of Business

Mailing Address

2119 WEST BRANDON BOULEVARD, SUITE A
BRANDON FL 33511

2119 WEST BRANDON BOULEVARD, SUITE A
BRANDON FL 33511

2. Principal Place of Business

3. Mailing Address

3225 S. MacBride Ave

Suite, Apt. #, etc.

Suite 129-258

City & State

Tampa, Fla.

Zip

33629

Country

USA

Suite, Apt. #, etc.

City & State

Zip

Country



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

59-3619697

Applied For

Not Applicable

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

NEUKAMM, JOHN B
101 E. KENNEDY BLVD.
SUITE 3140
TAMPA FL 33602-5151

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGRM ☐ Delete
NAME JOHNSON, DEBRA A
STREET ADDRESS 2119 WEST BRANDON BOULEVARD, SUITE A
CITY-ST-ZIP BRANDON FL 33511

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS see new mailing address above
CITY-ST-ZIP

TITLE MGRM ☐ Delete
NAME JOHNSON, DAVID A
STREET ADDRESS 2119 WEST BRANDON BOULEVARD, SUITE A
CITY-ST-ZIP BRANDON FL 33511

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS see new mailing address above
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

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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 REQUIRED

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

Date Daytime Phone

(813)
4/26/2003 334
8368

CR2E083 (10/02)

0033185

Attachment

30068874
199000009157

New Address: David and Debra Johnson
3225 S. MacDill Ave.
Suite 129-258
Tampa, FL 33629-8171