## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L9900009268

1. Entity Name

## **ROWENA REALTY LLC**



FILED Apr 21, 2003 8:00 am Secretary of State 04-21-2003 90113 011 \*\*\*\*50.00

						55/					
Principal Plac	ce of Business		Mailing Address		•						
2201 GILLIS COURT MAITLAND FL 32751 US			2201 GILLIS COURT MAITLAND FL 32751 US							1181 1811 1 <b>88</b> 1	
2. Principal P	Place of Busines	<u> </u>	3. Mailing Address		<del></del>						
Zi i morpari	1000 07 20011100		- Walling Floorists					<b>8881 88111 88114 88141 88</b> 7	O LOUIS HEBIT DE	ISBA (BIS 198)	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES				
City & Stat	te		City & State			4. FEIN	4. FEI Number 59-3630899 Applied For Not Applicable				
Zip Country			Zip Country			5. Certif	5. Certificate of Status Desired   \$5.00 Additional Fee Required				
	6. Name ar	d Address of Current Re	egistered Agent			7. Name	e and Address of	New Registered A	gent		
DAN	VC CEDAID				Name	ومشع فدها المادات	, c <del>- 550000</del>		eres u	1	
BANKS, GERALD F			Street Address			ress (P.O. Box N	(P.O. Box Number is Not Acceptable)				
	FLAND FL 327		•					<del></del>			
				,					<del></del>		
					City			FL.	Zip Cod	ie	
8. The above the obligat	named entity s tions of registere	ubmits this statement for ted agent.	he purpose of changing its	register	ed office or re	gistered agent,	or both, in the Sta	te of Florida. I am f	amiliar with,	and accept	
SIGNATURE	Signature, typed or p	rinted name of registered agent and	d title if applicable. (NOT	E: Registere	d Agent signature r	equired when reinstati	ng)	DATE		<del></del> -	
			FILE N	)Wiii	FEE IS \$50						
			Make Check Payab	le to Fl			te				
9.		MANAGING MEMBERS			ay 1, 2005			TIONS (CHANGES			
TITLE	MGR	MANAGING MEMBER	Detete	10.	<u> </u>		AUUI	TIONS/CHANGES	☐ Change	Addition	
NAME	BANKS, GEI	RALD F	□ Delete	NAM					onengo		
STREET ADDRESS	2201 GILLIS			STR	EET ADDRESS						
CITY-ST-ZIP	MAITLAND F	L 32751	<u> </u>	CITY	'-ST-ZIP			<u></u> -			
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NAME				NAM	E J				-		
STREET ADDRESS					ET ADDRESS						
CITY-ST-ZIP				CITY	-ST-ZIP						
11. Lhereby o	ertify that the in	formation supplied with th	is filing does not qualify for	the eve	motion stated	in Section 119.0	7(3)(i) Florida St	atutes 1 further cert	ify that the ir	nformation	

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:

BER, MANAGER, OR AUTHORIZED REPRESENTATIVE