

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0044526

DOCUMENT # M00000000262

1. Entity Name *Palm Coast Waterway Invest, LLC formerly known as*
FLORIDA WATERWAY PROPERTIES, LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 JUL -7 PM 3:18

Principal Place of Business
10800 SIKES PLACE, STE 250
CHARLOTTE NC

Mailing Address
10800 SIKES PLACE, STE 250
CHARLOTTE NC

2. Principal Place of Business
6453 East Hwy 100

3. Mailing Address
10800 Sikes Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

250

☐ CHECK HERE IF MAKING CHANGES



City & State
Flagler Beach, FL

City & State
Charlotte NC

4. FEI Number **56-2184356**

Applied For
Not Applicable

Zip
32136

Country
Flagler

Zip
28277

Country
Meck.

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

6. Name and Address of Current Registered Agent

KATZ, B. PAUL
1 FLORIDA PARK DRIVE SOUTH, ATRIUM STE
PALM COAST FL 32137

7. Name and Address of New Registered Agent

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

500021338385
07/07/03--01022--006 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGR
ALLEN, WILLIAM G
10800 SIKES PLACE, SUITE 250
CHARLOTTE NC 28277

☐ Delete

10. ADDITIONS/CHANGES

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

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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 of William G. Allen

704-847-6006

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

Date

Daytime Phone #

CR2E083 (10/02)