

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M01000002477

1. Entity Name

MARLIN-MANAGEMENT SERVICES, LLC


 FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

03 APR -4 PM 5:01

Principal Place of Business

 % BURTON, BARTLETT & GLOGOVAC
 50 W. LIBERTY STREET, STE. 650
 RENO NV 89501

Mailing Address

 % BURTON, BARTLETT & GLOGOVAC
 50 W. LIBERTY STREET, STE. 650
 RENO NV 89501

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 91-2160615

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

 STAPLES, JOHNSTON R III
 3600 COMMERCE BOULEVARD
 KISSIMMEE FL 34741

7. Name and Address of New Registered Agent

Name

Richard W. Baker

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

2535 Success Drive

City

Odessa

FL

Zip Code 33556

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

B. W. Baker, Manager

3/25/03

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

TITLE	MGR	☐ Delete
NAME	BAKER, RICHARD W	
STREET ADDRESS	2535 SUCCESS DRIVE	
CITY-ST-ZIP	ODESSA FL 33556	
TITLE	MGR	☐ Delete
NAME	SPEER, ROY M	
STREET ADDRESS	2535 SUCCESS DRIVE	
CITY-ST-ZIP	ODESSA FL 33556	
TITLE	MGR	☒ Delete
NAME	STAPLES, JOHNSTON R III	
STREET ADDRESS	3600 COMMERCE BOULEVARD	
CITY-ST-ZIP	KISSIMMEE FL 34741	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS	700015297297	
CITY-ST-ZIP	04/04/03--01008--005 **50.00	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☒ Addition
NAME	Celia Bachtman-MGR	
STREET ADDRESS	3600 Commerce Blvd.	
CITY-ST-ZIP	Kissimmee, FL 34741	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

Celia Bachtman 3/24/03 407 251 2020