

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 28, 2003 8:00 am
Secretary of State

01-28-2003 90048 025 *****50.00

DOCUMENT # M02000002937

1. Entity Name

JACKSONVILLE LODGING, L.L.C.



Principal Place of Business

**523 CAMELOT DRIVE
ABERDEEN SD 57401**

Mailing Address

**523 CAMELOT DRIVE
ABERDEEN SD 57401**

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 **75-3086401**

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

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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 ☐ Delete
NAME **MGRM WEISBECK, KEVIN J**
STREET ADDRESS **2211 8TH AVE. NE**
CITY-ST-ZIP **ABERDEEN SD 57401**

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

TITLE ☐ Delete
NAME **MGRM MCGRANE, MARK K**
STREET ADDRESS **138 E. PHILIP**
CITY-ST-ZIP **DES MOINES IA 50315**

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

TITLE ☐ Delete
NAME **MGRM VERSHURE, PAUL**
STREET ADDRESS **40 N. 15TH AVE. UNIT 60**
CITY-ST-ZIP **WAITE PARK MN 56387**

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

TITLE ☐ Delete
NAME **MGRM HELM, MICHAEL P**
STREET ADDRESS **13890 370TH AVE.**
CITY-ST-ZIP **MINA SD 57462**

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

TITLE ☐ Delete
NAME **MGRM STOCKERT, JEFFERY A**
STREET ADDRESS **523 CAMELOT DRIVE**
CITY-ST-ZIP **ABERDEEN SD 57401**

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

TITLE ☒ Delete
NAME **MGRM RIVETT, RHONDA**
STREET ADDRESS **523 CAMELOT DRIVE**
CITY-ST-ZIP **ABERDEEN SD 57401**

TITLE ☐ Change ☒ Addition
NAME **MGRM R&R Rivett Investments, L.L.C.**
STREET ADDRESS **523 Camelot Drive**
CITY-ST-ZIP **Aberdeen, SD 57401**

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: **Jeffrey A. Stockert, Member**

605-229-

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

Date **1/16/03**

Daytime Phone # **8645**

CR2E083 (10/02)