2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2003 8:00 am

i. Entity N	Name 1. L.L.C.					-14-2003 900:	y 	
Principal P	Place of Business	Mailing Address						
1418 SYCAMORE LAKE DRIVE FORISTELL MO 63343		1418 SYCAMORE LAKE DRIVE FORISTELL MO 63343						
2. Principa	al Place of Business	3. Mailing Address						
Suite, A	pt. #, etc.	Cultar Augusti			i routdott itti OBti	a tente antil antil Asili	i Baile ariae ilili sa	OT, OTHER BUILTINGS
City & State		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
————	tate	City & State			4. FEI Number	2-2385348		Applied For
Zip 6334	Country	Zip	Country		F. O-245-11 (0)		\$5.00	Not Applicab
6309	6 Name and Address of Communication	63348			5. Certificate of Stat	us Desired [ے ہوں۔ Fee Requ	Additional Jired
	6. Name and Address of Current	Hegistered Agent			7. Name and Addre	ss of New Regist	lered Agent	
SH	HELTON, JOHN D		Name	•	-			
	10 GULF BLVD. DIAN ROCKS BEACH FL		Street	Address (P.0	O. Box Number is No	Acceptable)		
			City					
The phou	re named entity submits this statement for ations of registered agent.		1 -				FL Zip Ci	ode
	Signature, typed or printed name of registered agent an	nd title if applicable. (NO	TE: Registered Agent sign	ature required who	en reinstating)	D	DATE	
BIGNATURE		FILE N Make Check Payat Du	IOW!!! FEE IS	\$50.00 epartment			PATE	
	MANAGING MEMBER	FILE N Make Check Payat Du	IOW!!! FEE IS	\$50.00 epartment	of State			
rle	MANAGING MEMBER	FILE N Make Check Payat Du	IOW!!! FEE IS ble to Florida De ue By May 1, 200	\$50.00 epartment 03	of State	DDITIONS/CHAN	IGES	Addition
LE ME	MANAGING MEMBER MGR RFUKAHR, GARY L	FILE N Make Check Payat Du S/MANAGERS	IOW!!! FEE IS: ble to Florida De ue By May 1, 200	\$50.00 epartment 03	of State	DDITIONS/CHAN	IGES	☐ Addition
[le MME REET ADDRESS	MANAGING MEMBER MGR RFUKAHR, GARY L 1418 SYCAMORE LAKE DRIVE	FILE N Make Check Payat Du S/MANAGERS	IOW!!! FEE IS: ble to Florida De ue By May 1, 200 10. TITLE NAME STREET ADDRESS	\$50.00 epartment 03 M 0 R 0 (7)	of State BRM KAHR, GAR, SYCA, MORE	DDITIONS/CHAN	IGES	☐ Addition
LE ME REET ADDRESS Y-ST-ZIP	MANAGING MEMBER MGR RFUKAHR, GARY L	FILE N Make Check Payat Du S/MANAGERS Delete	IOW!!! FEE IS ble to Florida De ue By May 1, 200 10. TITLE NAME STREET ADDRESS CITY-SJ-ZIP	\$50.00 epartment 03 M C R U F 1418 FO F 151	of State SRM KAHR, GAR, SYCO, MORE FELL, MO 63	DDITIONS/CHAN	IGES	☐ Addition
LE ME EET ADDRESS Y-ST-ZIP E	MANAGING MEMBER MGR RFUKAHR, GARY L 1418 SYCAMORE LAKE DRIVE FORISTELL MO 63343	FILE N Make Check Payat Du S/MANAGERS	IOW!!! FEE IS DIE to Florida De DIE BY May 1, 200 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	\$50.00 epartment 03 M C R V F 1418 F 0 M S M G	of State SRM KAHR, GAR, SYCO, MORE FELL, MO 63	DDITIONS/CHAN Y L Lake Orive 3348	IGES	
LE ME REET ADDRESS Y-ST-ZIP LE ME EET ADDRESS	MANAGING MEMBER MGR RFUKAHR, GARY L 1418 SYCAMORE LAKE DRIVE FORISTELL MO 63343 MGR RFUKAHR, ALANA 1418 SYCAMORE LAKE DRIVE	FILE N Make Check Payat Du S/MANAGERS Delete	IOW!!! FEE IS ble to Florida De ue By May 1, 200 10. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	S50.00 epartment 03 M C R V F I A I B I F O M S I R U F K	of State SRM KAHR, GAR, SYCO, MORE FELL, MO 63 R CAHR, ALAI	DDITIONS/CHAN Y L Lake Orive 3348 VA	IGES Change	
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ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME EET ADDRESS /-ST-ZIP	MANAGING MEMBER MGR RFUKAHR, GARY L 1418 SYCAMORE LAKE DRIVE FORISTELL MO 63343 MGR RFUKAHR, ALANA 1418 SYCAMORE LAKE DRIVE FORISTELL MO 63343 MGR SHELTON, JOHN ROUTE 3, BOX 37 MONTGOMERY CITY MO 63361	FILE N Make Check Payat Du S/MANAGERS Delete Delete	JOW!!! FEE IS DIE to Florida De De By May 1, 200 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO.00 epartment on the second	of State SRM KAHR, GAR, SYCOMORE FELL, MO 63 R TOHR, ALAI GYCOMORE LA GOL, MO 6 TON, JOHN 3, BOK 37	DDITIONS/CHAN Y L Lake Drive 3348 VA Ke Drive 3348	GES Change Change Change	☐ Addition
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11 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.