

# 2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

00 MAR 31 PM 1:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*ny 4/12*



DO NOT WRITE IN THIS SPACE

DOCUMENT # M96000000076

1. Entity Name  
WELLSPRING RESOURCES, LLC

Principal Place of Business  
6707 DEMOCRACY BLVD  
SUITE 800  
BETHESDA MA 20817

Mailing Address  
8900 FREEDOM COMMERCE PARKWAY  
JACKSONVILLE FL 32256-8264

2. Principal Place of Business.

*8900 FREEDOM COMMERCE PKWY.*  
Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

*JACKSONVILLE FL*

City & State

Zip

Country

*32256-8264 USA*

Zip

Country

4. FEI Number

52-1963899

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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.

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 Department of State**

9. MANAGING MEMBERS/MEMBERS

TITLE MGR ☒ Delete  
NAME SMITH, A W JR.  
STREET ADDRESS 6707 DEMOCRACY BLVD., #800  
CITY-ST-ZIP BETHESDA MA 20817

TITLE MGR ☒ Delete  
NAME BARDENWERPER, WALTER W  
STREET ADDRESS 6707 DEMOCRACY BLVD., #800  
CITY-ST-ZIP BETHESDA MA 20817

TITLE MGR ☐ Delete  
NAME GRIMES, RICHARD T  
STREET ADDRESS 8900 FREEDOM COMMERCE PARKWAY  
CITY-ST-ZIP JACKSONVILLE FL

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 CONTROLLER MGRM ☐ Change ☒ Addition  
NAME JOE McDONALD  
STREET ADDRESS 8900 FREEDOM COMMERCE PARKWAY  
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE PRESIDENT/CEO MGRM ☐ Change ☒ Addition  
NAME JAMES E. MURPHY  
STREET ADDRESS 8900 FREEDOM COMMERCE PARKWAY  
CITY-ST-ZIP JACKSONVILLE FL 32256

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

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:

*Richard T. Grimes*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

*3/23/2000*  
Date

*904-791-2803*  
Daytime Phone #

CR2E083 (9/99)