

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M98000000464

1. Entity Name

CHETOLA DEVELOPMENT GROUP L.L.C.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAR -1 AM 10:55

Principal Place of Business

2171 QUAIL RUN DRIVE, SUITE B  
BATON ROUGE LA 70808

Mailing Address

2171 QUAIL RUN DRIVE, SUITE B  
BATON ROUGE LA 70808-4127

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

72-1397896

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



## 6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

## 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  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
MGRM  
HICKS, STEVE E  
2171 QUAIL RUN DRIVE, SUITE B  
BATON ROUGE LA 70808 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
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## 10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP  
☐ Change ☐ Addition  
WJ 3/14/00

TITLE  
NAME  
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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 recipient or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

**SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Steve E Hicks

2/18/00

Date

225/766-3999

Daytime Phone #

CR2E083 (9/99)