

# 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0000633

DOCUMENT # M98000000814

1. Entity Name  
LANDSOUTH CONSTRUCTION, LLC



FILED  
03 APR 29 PM 5:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
100 EXECUTIVE WAY, SUITE 206  
PONTE VEDRA BEACH FL 32082

Mailing Address  
100 EXECUTIVE WAY, SUITE 206  
PONTE VEDRA BEACH FL 32082

2. Principal Place of Business  
1680 The Greens Way  
Suite, Apt. #, etc.  
Suite 100

3. Mailing Address  
1680 The Greens Way  
Suite, Apt. #, etc.  
Suite 100

City & State  
Jacksonville Beach FL

City & State  
Jacksonville Beach FL

Zip Country  
32250 USA

Zip Country  
32250 USA

4. FEI Number 58-2396999

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

PYKE, JAMES G  
100 EXECUTIVE WAY, SUITE 206  
PONTE VEDRA BEACH FL 32082

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
1680 The Greens Way, Suite 100  
City Jacksonville Beach FL Zip Code 32250

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 *James G. Pyle*  
Signature typed or printed name of registered agent and title if applicable.

James G. Pyle  
(NOTE: Registered Agent signature required when reinstating)

4/28/03  
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 MGRM  
NAME PYLE, JAMES G  
STREET ADDRESS 100 EXECUTIVE WAY, SUITE 206  
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 ☐ Delete

TITLE MBR  
NAME DAWS, JAMES H  
STREET ADDRESS 1760 BASS ROAD, SUITE 202  
CITY-ST-ZIP MACON GA 31210 ☐ Delete

TITLE MBR  
NAME TUCKER, JEFFREY S  
STREET ADDRESS 1760 BASS ROAD, SUITE 202  
CITY-ST-ZIP MACON GA 31210 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP *mk* ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS 1680 The Greens Way, Suite 100  
CITY-ST-ZIP Jacksonville Beach, FL 32250 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS 500017303605  
CITY-ST-ZIP 04/29/03--01050--008 \*\*\$5.00 ☐ Change ☐ Addition

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

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

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

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

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:

*James G. Pyle*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

904-273-6004

CR2E083 (10/02)