

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0016061 AB

DOCUMENT # M99000000121

1. Entity Name
GRESHAM ASSOCIATES ARCHITECTURE, PROFESSIONAL LIM

00 MAY -1 AM 8:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
409 BROADWAY SUITE B
PADUCAH KY 42001

Mailing Address
409 BROADWAY SUITE B
PADUCAH KY 42001-0713



DO NOT WRITE IN THIS SPACE

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 61-1291302 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

WAIT, ANN
480 GULF SHORE DRIVE
DESTIN FL 32541-3094

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 _____ (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

10. ADDITIONS / CHANGES

TITLE NAME MGRM GRESHAM, PAUL L
STREET ADDRESS 409 BROADWAY SUITE B
CITY- ST- ZIP PADUCAH KY 42001

TITLE NAME
STREET ADDRESS
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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:

SIGNATURE REQUIRED Paul L. Gresham

4/19/00 270-442-5439

CR2E083 (9/99)