

2000 UNIFORM BUSINESS REPORT (UBR)

0013760 AF

DOCUMENT # M99000000888

1. Entity Name
WOODS AT FRENCHMAN'S CREEK, LLC

Principal Place of Business

% DRUCKER & FALK, LLC
7200 STONEHENG DR., SUITE 211
RALEIGH NC 27613

Mailing Address

% DRUCKER & FALK, LLC
7200 STONEHENG DR., SUITE 211
RALEIGH NC 27613-1620

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SECRETARY OF STATE
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

9286 Warwick Blvd.

Suite, Apt. #, etc.

City & State

Newport News, VA

Zip

23607

Country

4. FEI Number

56-2136174

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLALOCK, LANDERS, WALTERS & VOGLER, P.A.
802 11TH ST. WEST
BRADENTON FL 34205

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

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FALK, DAVID C SR % 7200 STONEHENG DR., SUITE 211 RALEIGH NC 27613	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY - ST - ZIP		<input type="checkbox"/> Delete
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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 receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

David C. Falk, Sr.
[Signature]

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

Jan 24, 2000 919-846-7300
Date Daytime Phone #

CR2E083 (9/99)