

2001 UNIFORM BUSINESS REPORT (UBR)

0031202 AB

DOCUMENT # M99000001748

1. Entity Name

SHIPWATCH BY THE SEA, A LIMITED LIABILITY COMPAN

FILED

01 JAN 17 PM 2:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

5401 JACKSON STREET
ALEXANDRIA LA 71303

Mailing Address

5401 JACKSON STREET
ALEXANDRIA LA 71303

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

62-1798996

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

DECKER, DIANE M
35000 EMERALD COAST PARKWAY
DESTIN FL 32541

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 MGR WHITE, DONALD P JR. ☐ Delete
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA LA 71303

TITLE NAME WHIT E, CHARLES N II ☐ Delete
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA LA 71303

TITLE NAME MGR WHITE, FREDERICK L ☐ Delete
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA LA 71303

TITLE NAME MGR WHITE HAYES, PAULA E ☐ Delete
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA LA 71303

TITLE NAME MGR WHITE JOHNSON, MARTHA A ☐ Delete
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA LA 71303

TITLE NAME MGR WHITE MANAGEMENT SERVICE, AN LLP ☐ Delete
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA LA 71303

10. ADDITIONS/CHANGES

TITLE NAME 1000035678; Chapter 1 ☐ Addition
STREET ADDRESS -01/23/01--01057--006
CITY-ST-ZIP *****50.00 *****50.00

TITLE NAME MGR WHITE, CHARLES N. II ☒ Change ☐ Addition
STREET ADDRESS 5401 JACKSON STREET
CITY-ST-ZIP ALEXANDRIA, LA 71303

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

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STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

1/9/01 (38) 445-8537

CR2E083 (11/00)