

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # M99000001930

1. Entity Name

DESHAW GROUP, LLC

Principal Place of Business

Mailing Address

8031 S. Division Ave
Grand Rapids MI 49548

2. Principal Place of Business

3. Mailing Address

8031 S. Division Ave
Suite, Apt. #, etc.
Grand Rapids MI

Same
Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

49548

USA

6. Name and Address of Current Registered Agent

4. FEI Number

Applied For

38-3497531

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of New Registered Agent

Name

Mike Sullivan

Street Address (P.O. Box Number is Not Acceptable)

2210 Destiny Way #2

City

Odessa

FL

Zip Code

33556

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 Michael C. Sullivan

Michael C. Sullivan

3/6/00

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 Manager ☐ Delete
JERRY DESHAW
STREET ADDRESS 8031 S. Division Ave
CITY-ST-ZIP Grand Rapids, MI 49548

TITLE Manager ☐ Delete
PATRICK DESHAW
STREET ADDRESS 295 Blue Isle Dr
CITY-ST-ZIP Holland, MI 49424

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

TITLE ☐ Delete

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME 400003187654-9
STREET ADDRESS -03/29/00--01005--008
CITY-ST-ZIP *****50.00 *****50.00

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

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: Jerry Deshaw

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

Jerry Deshaw

2/28/00

Date

616-281-8400

Daytime Phone #

CR2E083 (11/99)