

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90236 001 ****50.00

DOCUMENT # L01000021857

1. Entity Name

FLORIDA PROPERTIES MANAGEMENT, L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1100 S. Ocean Blvd

Suite, Apt. #, etc.

3. Mailing Address

1100 S. Ocean Blvd

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Palm Beach, FL

City & State
Palm Beach, FL

4. FEI Number
65-1159804

Applied For
Not Applicable

Zip
33480

Country
USA

Zip
33480

Country
USA

5. Certificate of Status Desired **\$5.00** Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
NRAI Services Inc

Street Address (P.O. Box Number is Not Acceptable)
526 E. Park Avenue

City Tallahassee FL Zip Code 32301

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.

DATE _____

FEE IS \$50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Member Donald.J. Trump 725 Fifth Avenue New York, NY 10022
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CR2E083B (12/01)

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: 

212-832-2000