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

DOCUMENT # L02000015146

Sanctuary Partners, LLC

1. Entity Name

**FILED** Jun 27, 2003 8:00 am Secretary of State 04-30-2003 90192 043 \*\*\*\*50.00

Daytime Phone #

DO NOT WRITE IN THIS SPACE				44005099		
2. Principal Place of Business  c/o Versaqqi Properties  Leas 1 hget Office 1301 Howard Ave.		Beasting Office 1301 Howard Ave.		DO NOT WRITE IN THIS SPACE		
City & State		City & State		4. FEI Number		Applied For
Tampa. Zip	Florida Country	Tampa, Flor	Country	27-0022475  5. Certificate of Status Desire	sd 🗆 💲	Not Applicable  5.00 Additional
33606		33606				
DO NOT WRITE IN THIS SPACE  Name David M. JJeffries, Esq. Street Address (P.O. Box Number is Not Acceptable) 101 East Kennedy Blvd. Suite 1030  City Tampa, FL Zip Code 33602						
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. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  Signature speed of printed name of registered agent and the it speeds agent.  DATE						
FEE IS \$50.00  Make Check Payable to Florida Department of State  DUE BY MAX 1						
9. MANAGING MEMBERS/MANAGERS			CHAPTER ( S. S. A. P. C. S.		300 San Europe	# 3 5 5 5 5 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6
TITLE MM NAME STREET ADDRESS CITY-ST-ZIP	Manuel J. Versag c/o Vesaggi Prop Leasing Office 1301 S. Howard A	erties	NAME STREET ADDRESS CITY-ST-ZIP			083B (12)0
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Tampa, Florida 3	3606	NAME STREET ADDRESS CITY ST ZIP			CRS
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME 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.						

attachment

FEE & JEFFRIES, P.A.

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813.229.8008 813.229.0046 (Fax)

WWW.FEEJEFFRIES.COM

June 24, 2003

Florida Department of State Division of Corporations Annual Reports Section Post Office Box 6478 Tallahassee, Florida 32314

Re: Sanctuary Partners, LLC, L02000015146

Dear Sir or Madam:

Enclosed please find the corrected Uniform Business Report regarding the above-referenced limited liability company. Please apply the check, which was previously received, to this revised Uniform Business Report.

If you have any questions, please do not hesitate to call.

Very truly yours

David M. Jeffries

DMJ:dsg

enclosure

२६६ हुन्य सम्बद्धान्त्रकार । प्रतिकारित का अपने अधिकृतिकार ए । अनुस्कृति का क्षेत्रकार्यकारी का सम्बद्धान अकार ता सुन्य सम्बद्धान अस्ति । प्रतिकारित का अधिकृतिकार एक अनुस्कृति । विश्वस्थानिकारी का सम्बद्धान अकार अस्ति अस् - अस्ति अस्ति । प्रतिकार अधिकारी अस्ति । स्वतिकारी अस्ति । अस्ति अस्ति सम्बद्धानिकारी अस्ति स्वतिकारी स्वतिकार