

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0017319 AB

DOCUMENT # M95000000291

1. Entity Name
ECHL PROPERTIES, L.L.C.

00 MAY 16 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
125 VILLAGE BLVD., SUITE 210
PRINCETON NJ 08540

Mailing Address
125 VILLAGE BLVD., SUITE 210
PRINCETON NJ 08540-5753



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
103 MAIN STREET
Suite, Apt. #, etc.
SUITE 300
City & State
PRINCETON NJ

3. Mailing Address
103 MAIN STREET
Suite, Apt. #, etc.
SUITE 300
City & State
PRINCETON NJ

4. FEI Number 56-1937567
Applied For
Not Applicable

Zip 08540 Country USA
Zip 08540 Country USA

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

6. Name and Address of Current Registered Agent
HOYT, NEIL
201 EAST GREGORY STREET, REAR
PENSACOLA FL 32501

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)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREENWALD, HERB 2507 51ST AVE. HYATSSVILLE MD 20781	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR FELIX, CHARLES 201 E. GREGORY ST., REAR PENSACOLA FL 35201	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GAGNON, JOHN 2350 BEACH BLVD. BILOXI MS 39531	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NAGIN, RAY 2120 CANAL ST. NEW ORLEANS LA 70112	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CAGGIANO, MICHAEL 14450 OLD MILL RD., STE 201 UPPER MARLBORO MD 20772	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RICHARD W. ADAMS 103 MAIN STREET, SUITE 300 PRINCETON, NJ 08540	☐ Change ☒ Addition

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 OR MANAGER
Date 4/28/00 Daytime Phone #

(696) (980) 310