

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2002 8:00 am
Secretary of State
04-16-2002 90083 034 ****50.00

DOCUMENT # L98000002100

1. Entity Name
1410 21ST STREET, LC

Principal Place of Business

**203 N. MARION STREET
TAMPA FL 33602**

Mailing Address

**203 N. MARION STREET
TAMPA FL 33602**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3539658**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**GIORDANO, MICHAEL B
777 S. HARBOUR ISLAND BLVD., SUITE 140
TAMPA FL 33602**

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
Due By May 1, 2002**

9. MANAGING MEMBERS / MANAGERS

TITLE NAME ☐ Delete
**MGR
HENDRY, HAYNES T
203 N. MARION STREET
TAMPA FL 33602**

TITLE NAME ☐ Delete
**MGR
GIORDANO, MICHAEL
777 SOUTH HARBOUR ISLAND BLVD., SUITE 140
TAMPA FL 33602**

TITLE NAME ☐ Delete
**MGR
GILLIS, RODERICK J
201 NORTH FRANKLIN STREET, STE 2650
TAMPA FL 33602**

TITLE NAME ☐ Delete
**MGR
OXTAL, RONALD A
203 N. MARION STREET
TAMPA FL 33602**

TITLE NAME ☐ Delete
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OXTAL, RONALD A
203 N. MARION STREET
TAMPA FL 33602**

TITLE NAME ☐ Delete
**MGR
OXTAL, RONALD A
203 N. MARION STREET
TAMPA FL 33602**

10. ADDITIONS / CHANGES

TITLE NAME ☐ Change ☐ Addition
**MGR
HENDRY, HAYNES T
203 N. MARION STREET
TAMPA FL 33602**

TITLE NAME ☐ Change ☐ Addition
**MGR
GIORDANO, MICHAEL
777 SOUTH HARBOUR ISLAND BLVD., SUITE 140
TAMPA FL 33602**

TITLE NAME ☐ Change ☐ Addition
**MGR
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OXTAL, RONALD A
203 N. MARION STREET
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TITLE NAME ☐ Change ☐ Addition
**MGR
OXTAL, RONALD A
203 N. MARION STREET
TAMPA FL 33602**

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 #

4-1-02

813-229-5352

CR2E083 (9/01)