## 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L000000197  1. Entity Name  AJV REALTY MANAGEMENT - FLORIDA, L.L.C.						FILED 01 APR 30 PM 6: 19			
Principal Place of Business 620 COLES MILL ROAD HADDONFIELD NJ 08033		Mailing Address 620 COLES MILL ROAD HADDONFIELD NJ 08033	620 COLES MILL ROAD			SECRETARY OF STATE TALLAHASSEE, FLORIDA			
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State		City & State		<b>4.</b> F	FEI Number	- <del>-   -   -   -   -   -   -   -   -   -</del>	pplied For		
Zip	Country	Zip	ip Country		5. (	Certificate of Status Desired	□ \$5.00 Add	ditional	
6. N	Name and Address of Curr	ent Registered Agent		7. Name and Address of New Registered Agent					
MINDOE W DE	DADI EV	•		Name	-	•			
MUNROE, W. BRADLEY 239 EAST VIRGINIA STREET				Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE F								· · · · · · · · · · · · · · · · · · ·	
		f		City	FL Zip Code				
The above remed	antity automits this statemer	nt for the purpose of changing its	- Agistora	d office o	r registered age	ont or both in the State of Elevi			
SIGNATURE Signature,	typed or printed name of registered a		1.1.	II	ture required when rei	instating)	DATE		
		FILE NO Make Check Pa				e			
) <u> </u>	MANAGING ME	MBERS/MEMBERS	10.		T	ADDITIONS/C			
ITLE IAME ITREET ADDRESS ITY-ST-ZIP		☐ Delete		T ADDRESS ST- ZIP	Vincen 620 Co	ing member + J. Ciecke les mill Rd Field, NJ 0803	☐ Change	Addition	
ITLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Delete		T ADDRESS ST-ZIP		,	☐ Change	☐ Addition	
ITLE AME TREET ADDRESS ITY-ST-ZIP		☐ Delete		t address St-zip	-	1000042 -05/15/0 *****50	□ Change  217861-  0101101(  0.00 *****	☐ Addition : = = = = = = = = = = = = = = = = = =	
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TLE AME TREET ADDRESS TY-ST-ZIP		☐ Delete	TITLE	r address			☐ Change	Addition	
I hereby certify the indicated on this related to the indicated on th	eport is true and accurate/a	with this filing does not qualify for and that my signature shall have the empowered to execute this new things.	he exem	ption stat	ct as if made ur	nder oath; that I am a managing	rther certify that the ing member or manage	nformation r of the	

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/23/1 856-665-5709 Date