2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L0000000856

VAN VLECK-ASHBY MANAGEMENT PROPERTIES, L.L.C.

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FILED Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90090 026 ****50.00

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Principal Plac	e of Business	Mailing Address		_						
13131 UNIVERS	SITY DRIVE	13131 UNIVERSITY DRIVE FT. MYERS FL 33907	13131 UNIVERSITY DRIVE							
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2. Principal P	lace of Business	3. Mailing Address	3. Mailing Address							
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State	9	City & State			4. FEI Num	65-0979684	·· ··· ·		pplied For ot Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired Status Desired Fee Required					
	6. Name and Address of Currer	nt Registered Agent	<u> </u>		7. Name an	d Address of New Reg				
	المراجع العالمة			Name == *==	والمستحدث والمعاد	13887 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	·			
1313	VLECK, PAM 31 UNIVERSITY DRIVE	-	Street Address (P.O. Box Number is Not Acceptable)							
FI. I	MYERS FL 33907		-							
				City			FL	Zip Cod	le	
	named entity submits this statement ons of registered agent.	for the purpose of changing its	registered	office or regis	stered agent, or b	oth, in the State of Florid	a. I am fa	miliar with,	and accept	
SIGNATURE _	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE	E: Registered A	gent signature requ	uired when reinstating)	<u></u>	DATE			
		Make Check Payabl		E IS \$50.0 ida Denartr	_					
			e By May		ment of Glate					
9. MANAGING MEMBERS/MANAGERS						ADDITIONS/CH	HANGES			
TITLE	MGRM	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	VAN VLECK, PAMELA K		NAME							
STREET ADDRESS	3901 SE 19TH AVE.		STREET	ADDRESS					ľ	
CITY-ST-ZIP	CAPE CORAL FL 33904		CITY-ST	- ZIP						
TITLE	MGRM	☐ Delete	TITLE					☐ Change	☐ Addition	
NAME	ASHBY, CHARLE C		NAME							
STREET ADDRESS CITY-ST-ZIP	13131 UNIVERSITY DRIVE		CITY-ST	ADDRESS					1	
	FT. MYERS FL 33907 MGR									
TITLE NAME	DEZORT, CARLOS	□.Delete	NAME	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	EZORT	CAROL S.	· /	Change .	Addition	
STREET ADDRESS	13131 UNIVERSITY DRIVE			ADDRESS		LANUL 3.			-	
CITY-ST-ZIP	FORT MYERS FL 33907		CITY-ST							
TITLE		☐ Delete	TITLE	1	 -			☐ Change	☐ Addition	
NAME			NAME						Ì	
STREET ADDRESS	,		STREET /	ADDRESS					}	
CITY-ST-ZIP			CITY-ST	- ZIP						
TITLE	14.4	☐ Delete	TITLE					Change	☐ Addition	
NAME			NAME						J	
STREET ADDRESS CITY-ST-ZIP			STREET /	l						
								Change	Addition	
TITLE NAME		☐ Delete	TITLE NAME				I	☐ Change	Addition	
STREET ADDRESS	•		STREET A	ADDRESS					}	
CITY-ST-ZIP			CITY-ST]	
11. I hereby c	ertify that the information supplied wi	th this filing does not qualify for	the exemp	tion stated in	Section 119,07(3)(i), Florida Statutes, I fu	rther certif	v that the ir	nformation	

Thereby definity that the information supplied with this litting does not quality for the exemption stated in Section 113.07(3),0,1 folial statutes 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: WWW.1