

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000002104

1. Entity Name
AV INVESTMENTS XXI, L.L.C.

Principal Place of Business
533 S. HOWARD AVE., #8, PMB #53
TAMPA FL 33606

Mailing Address
533 S. HOWARD AVE., #3, PMB #53
TAMPA FL 33606

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3627377

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LEONARD, RIVERSON S
533 S. HOWARD AVE., #8, PMB #53
TAMPA FL 33606

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 RIVERSON S LEONARD
Signature, typed or printed name of registered agent and title if applicable

(NOT Registered Agent Signature required when reinstating)

DATE 4/20/01

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

800004287908--2
-05/22/01--01038--016
*****55.00 *****55.00

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME LEONARD, RIVERSON S
STREET ADDRESS 533 S. HOWARD AVE., #8, PMB #53
CITY-ST-ZIP TAMPA FL 33606 ☐ Delete

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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.

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

Date

Daytime Phone #

APPROVED
AND
FILED

01 MAY -1 PM 5:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

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CR2E083 (11/00)