

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L00000013468

1. Entity Name  
LONGBOAT GLOBAL ADVISORS, L.L.C.

FILED

01 APR 27 PM 9:25

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
417 12TH STREET WEST  
SUITE 213  
BRADENTON FL 34205

Mailing Address  
417 12TH STREET WEST  
SUITE 213  
BRADENTON FL 34205

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1060115

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PERRON, ANDRE R ESQ  
OZARK & PERRON PA  
2808 MANATEE AVE W  
BRADENTON FL 34205

Name

Robert Joseph Beasley

Street Address (P.O. Box Number is Not Acceptable)

417 12th Street W. Ste. 213

City

Bradenton, Florida

FL

Zip Code

34205

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

*Robert Joseph Beasley*

Signature type or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/25/01

DATE

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

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☐ Delete

TITLE  
NAME  
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CITY-ST-ZIP

☐ 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

*Robert Joseph Beasley*

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

Date

4/25/01

Daytime Phone #

CR2E083 (11/00)

0021513 AF