## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # L0000015417

1. Entity Name

CORE COMMERCIAL REALTY, LLC



Apr 28, 2003 8:00 am Secretary of State 04-28-2003 90101 034 \*\*\*\*50.00

**FILED** 

Principal Plac	e of Business	Mailing Address						
1750 EAST SUNRISE BLVD. FT. LAUDERDALE FL 33304		P.O. BOX 5403 FT. LAUDERDALE FL 33310				11 <b>84:5:</b> (1881 8111 8186)		
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. FEI Nui	mber <b>65-1060898</b>		pplied For lot Applicable	
Zip	Country	Zip Country		5. Certific	ate of Status Desired	S5.00 Ac Fee Requir		
	6. Name and Address of Current R	legistered Agent	·	7. Name a	and Address of New Regi	stered Agent		
GILBERT, GLEN R			Name	Name				
1750 EAST SUNRISE BLVD. FT. LAUDERDALE FL 33304			Street Add	Street Address (P.O. Box Number is Not Acceptable)				
			<u> </u>					
			City			FL Zip Coo	ie	
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. I am familiar with, and accept the obligations of registered agent.								
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 Florida Department of State  Due By May 1, 2003								
9.	MANAGING MEMBER		10.	<del></del>	ADDITIONS/CH	IANGES		
TITLE	MGRM	☐ Delete	TITLE			☐ Change	Addition	
NAME	CORE COMMUNITIES, LLC	. ·	NAME		•		}:	
STREET ADDRESS CITY-ST-ZIP	1750 East Sunrise Boulevar   Fort Lauderdale FL 33304	U	STREET ADDRESS CITY-ST-ZIP				,	
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CITY-ST-ZIP	<u> </u>		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:

JRE: EXECUTIVE VICE President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/20/2003

Daytime Phone #