

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90326 022 ****55.00

DOCUMENT # L01000004211

1. Entity Name

SARASOTA REAL ESTATE LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1800 SECOND ST

Suite, Apt. #, etc.

SUITE 720

City & State

SARASOTA FL

Zip
34236

Country

SARASOTA

3. Mailing Address

1800 SECOND ST

Suite, Apt. #, etc.

SUITE 720

City & State

SARASOTA FL

Zip

34236

Country

SARASOTA

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4. FEI Number

63-0692047

Applied For

Not Applicable

5. Certificate of Status Desired



\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

SHERYL A. EDWARDS, P.A.

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

1800 SECOND ST

SUITE 720

City

SARASOTA

FL

Zip Code

34236

**DO NOT WRITE
IN THIS SPACE**

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.

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGER JOSEPH W. BOGUSZEWSKI 423 ST ARMANDS CIRCLE SARASOTA FL 34236
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MANAGER KRIS BILSKI 238 UPLAND ROAD REDWOOD CITY, CA 94062
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IN THIS SPACE**

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: