

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0014097

DOCUMENT # L01000004310

1. Entity Name

ACP GLADES MANAGER LLC



FILED
03 MAY -2 PM 5:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



☐ CHECK HERE IF MAKING CHANGES

Principal Place of Business

701 BRICKELL AVE., SUITE 3000
MIAMI FL 33131

Mailing Address

701 BRICKELL AVE., SUITE 3000
MIAMI FL 33131

2. Principal Place of Business

444 Brickell Avenue

Suite, Apt. #, etc.

Suite 900

City & State

Miami, Florida

Zip

33131

Country

USA

3. Mailing Address

1111 Brickell Avenue

Suite, Apt. #, etc.

Suite 2500

City & State

Miami, Florida

Zip

33131

Country

USA

4. FEI Number 65-1100586

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE., SUITE 3000
MIAMI FL 33131

7. Name and Address of New Registered Agent

Name

Stuart K. Hoffman, Esq.

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

1111 Brickell Avenue, Suite 2500

City

Miami,

FL

Zip Code

33131

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

600017896626
03/02/03--01055--017 **50.00

9. MANAGING MEMBERS/MANAGERS

TITLE NAME MGR
ACP GLADES MANAGER CORP.
STREET ADDRESS 701 BRICKELL AVE #3000
CITY-ST-ZIP MIAMI FL 33131 ☐ Delete

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME MGR ☒ Change ☐ Addition
ACP Glades Manager Corp.
STREET ADDRESS 444 Brickell Avenue, Suite 900
CITY-ST-ZIP Miami, Florida 33131

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

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

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

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

TITLE NAME ☐ Change ☐ Addition
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:

ACP Glades Manager LLC
By: ACP Glades Manager Corp.
Allen C. de Olazarra

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

Date

Daytime Phone #

CR2E083 (10/02)