

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# L01000007222

FILED
Apr 29, 2002 8:00 AM
Secretary of State

Entity Name: ADRIAN STREET TO RIVERSIDE, LLC

Current Principal Place of Business:

C/O MILLENNIUM REALTY ADVISORS LLC
900 S.E. 3RD AVE., STE. 201
FT LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

C/O MILLENNIUM REALTY ADVISORS LLC
900 S.E. 3RD AVE., STE. 201
FT LAUDERDALE, FL 33316

New Mailing Address:

FEI Number: 33-0764702

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COFFEY, KEVIN
900 S.E. 3RD AVE., STE. 201
FT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MEMBERS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM () Change (X) Addition
Name: COFFEY, KEVIN M
Address: 900 SE THIRD AVENUE #201
City-St-Zip: FORT LAUDERDALE, FL 33316 US

Title: MGRM () Change (X) Addition
Name: WALSH, JOHN F
Address: 425 BAY STREET
City-St-Zip: SANTA MONICA, CA 90405

Title: MGRM () Change (X) Addition
Name: EVANS, WILLIAM D
Address: 10 RED BIRCH
City-St-Zip: LITTLETON, CO 80127

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: KEVIN COFFEY

MGRM

04/29/2002

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date