

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000007923

1. Entity Name

RIVER RUN ASSOCIATES LLC

Principal Place of Business

791 PARK OF COMMERCE DRIVE
BOCA RATON FL 33487

Mailing Address

791 PARK OF COMMERCE DRIVE
BOCA RATON FL 33487

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

05-1106405

Applied For

Not Applicable

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

ELK, SCOTT A ESQ.
4800 N. FEDERAL HIGHWAY SUITE 200-E
ELK, BANKIER & CHRISTU LLP
BOCA RATON FL 33431

Name

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

City

FL

Zip Code

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

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 Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGR MILHOUSE, ROBERT E TRUSTEE
791 PARK OF COMMERCE DRIVE
BOCA RATON FL 33487 ☐ Delete

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP
MGR MILHOUSE, PAUL BALLARD TRUSTEE
791 PARK OF COMMERCE DRIVE
BOCA RATON FL 33487 ☐ 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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TITLE NAME STREET ADDRESS 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 E. Milhaus

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

4/29/02

Date

561-988-2113

Daytime Phone #

5/21

FILED
Jun 13, 2002 8:00 am
Secretary of State

05-22-2002 90266 036 ****50.00

92698



DO NOT WRITE IN THIS SPACE

CR2ED83 (9/01)