

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2003 8:00 am
Secretary of State

01-29-2003 90062 013 ****50.00

DOCUMENT # L01000009401

1. Entity Name

TRUST REAL ESTATE, LLC



Principal Place of Business

1200 N. FEDERAL HIGHWAY
SUITE 312
BOCA RATON FL 33432

Mailing Address

1200 N. FEDERAL HIGHWAY
SUITE 312
BOCA RATON FL 33432

2. Principal Place of Business

149 SW 15TH DR
Suite, Apt. #, etc.

3. Mailing Address

149 SW 15TH DR
Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

BOCA RATON, FL

4. FEI Number

APPLIED FOR

54-207 0347

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

THOMAS, DONALD J ESQ.
1200 N. FEDERAL HIGHWAY
SUITE 312
BOCA RATON FL 33432

7. Name and Address of New Registered Agent

Name

CARY M. NAGDEMAN

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

149 SW 15TH DR

City

BOCA RATON

FL

Zip Code

33432

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] CARY M. NAGDEMAN

(NOTE: Registered Agent signature required when reinstating)

1/22/03

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR	<input type="checkbox"/> Delete
NAME	NAGDEMAN, CARY M	
STREET ADDRESS	149 S.W. 15TH DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33432	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
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TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
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:

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

[Signature] CARY M. NAGDEMAN 1/22/03 (SG) 395-1029

Date

Daytime Phone #

CR2E083 (10/02)

09-20-02 13:27 FROM-

DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
HOLTSVILLE NY 00501

Attachment
55006319

LOI 000069401

T-021 P02/03 U-705

DATE OF THIS NOTICE: 09-11-2002
NUMBER OF THIS NOTICE: CP 575 B
EMPLOYER IDENTIFICATION NUMBER: 54-2070347
FORM: SS-4
0134406758 B

TRUST REAL ESTATE LLC
NAGDEMAN CARY N MEMBER
1200 N FEDERAL HWY STE 312
BOCA RATON FL 33432

FOR ASSISTANCE CALL US AT:
1-800-829-1040

OR WRITE TO THE ADDRESS
SHOWN AT THE TOP LEFT.

IF YOU WRITE, ATTACH THE
STUB OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER (EIN)

Thank you for your Form SS-4, Application for Employer Identification Number (EIN). We assigned you EIN 54-2070347. This EIN will identify your business account, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

Use your complete name and EIN shown above on all federal tax forms, payments and related correspondence. If you use any variation in your name or EIN, it may cause a delay in processing and incorrect information in your account. It also could cause you to be assigned more than one EIN.

Based on the information shown on your Form SS-4, you must file the following forms(s) by the date we show.

Form 1065

09/06/2002

The due date of your return has passed and we have no record of receiving it. Please file your form by 09-26-2002. The penalties and interest will accrue from the date of the return until it is filed.

Your assigned tax classification is based on information obtained from your Form SS-4. It is not a legal determination of your tax classification and is not binding on the IRS. If you want a determination on your tax classification, you may seek a private letter ruling from the IRS under the procedures set forth in Rev. Proc. 98-01, 1998-1 I.R.B. 7 (or the superceding revenue procedure for the year at issue).

If you need help in determining what your tax year is, you can get Publication 538, Accounting Periods and Methods, at your local IRS office.

If you have questions about the forms shown or the date they are due, you may call us at 1-800-829-1040 or write to us at the address shown above.