

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000012920

1. Entity Name

ACCESS RAGLAND DEVELOPMENT, LLC

Principal Place of Business

COASTAL TOWERS  
2400 EAST COMMERCIAL BLVD., STE. 625  
FT LAUDERDALE FL 33308

Mailing Address

COASTAL TOWERS  
2400 EAST COMMERCIAL BLVD., STE. 625  
FT LAUDERDALE FL 33308

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

YALALE, FELIPE  
COASTAL TOWERS  
2400 EAST COMMERCIAL BLVD., STE. 625  
FT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

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

TITLE MGRM ☐ Delete  
NAME ACCESS DEVELOPMENT, LLC  
STREET ADDRESS COASTAL TOWERS 2400 E COMMERCIAL BLVD #625  
CITY-ST-ZIP FT LAUDERDALE FL 33308

TITLE MGRM ☐ Delete  
NAME GARGANO, RONALD A  
STREET ADDRESS COASTAL TOWERS 2400 E COMMERCIAL BLVD #625  
CITY-ST-ZIP FT LAUDERDALE FL 33308

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

10. ADDITIONS/CHANGES

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

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

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

TITLE ☐ Change ☐ 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: *Ronald A. Gargano*

RONALD A. GARGANO

04.22.02

954-489-2400

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

Date

Daytime Phone #

CR2E083 (9/01)

0012967

**FILED**  
**Apr 24, 2002 8:00 A.M.**  
**Secretary of State**



DO NOT WRITE IN THIS SPACE