

5/22

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 23, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90201 044 \*\*\*\*50.00

**DOCUMENT # L01000019744**

1. Entity Name

**BAINBRIDGE PRESIDENTIAL EQUITY LLC**

Principal Place of Business

12791 WEST FOREST HILL BLVD.  
 SUITE 85  
 WELLINGTON FL 33414

Mailing Address

12791 WEST FOREST HILL BLVD.  
 SUITE 85  
 WELLINGTON FL 33414

2. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

4. FEI Number

105-1153239

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional**  
**Fee Required**

6. Name and Address of Current Registered Agent

DAVID J. POWERS, P.A.  
 7777 GLADES ROAD  
 SUITE 300  
 BOCA RATON FL 33434

7. Name and Address of New Registered Agent

Name

RICHARD A. SCHECHTER

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

12791 W. Forest Hill Blvd.

Suite 5B

City

Wellington

FL

Zip Code

33414

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 fee if applicable.

(NOTE: Registered Agent's signature required when reinstating)

RICHARD A. SCHECHTER

4/30/02

DATE

**FILE NOW!!! FEE IS \$50.00**

**Make Check Payable to Department of State**  
**Due By May 1, 2002**

9. MANAGING MEMBERS/MANAGERS

TITLE **DIRECTOR** ☐ Delete  
 NAME Richard A. Schechter  
 STREET ADDRESS 12791 W. Forest Hill Blvd.  
 CITY-ST-ZIP Wellington, FL 33414

TITLE **DIRECTOR** ☐ Delete  
 NAME Sheila Mead  
 STREET ADDRESS 12791 W. Forest Hill Blvd.  
 CITY-ST-ZIP Wellington, FL 33414

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  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
 NAME  
 STREET ADDRESS  
 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:

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

Date

Daytime Phone #

THOMAS J. KEADY VP 4/30/02 501-333-3669

CR2E083 (9/01)



*Attachment  
Doct# 913566*

FLORIDA DEPARTMENT OF STATE

**Katherine Harris**

Secretary of State

May 30, 2002

**BAINBRIDGE PRESIDENTIAL EQUITY LLC  
12791 WEST FOREST HILL BLVD.  
SUITE B5  
WELLINGTON, FL 33414**

Subject: **BAINBRIDGE PRESIDENTIAL EQUITY LLC**

Reference Number: **L01000019744**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/jc

ANNUAL REPORTS SECTION