

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90107 019 ****55.00

DOCUMENT # L 01000020477

1. Entity Name

ATLANTIS PROPERTY INVESTMENTS, LTD. CO.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

13336 N. CENTRAL AVE

Suite, Apt. #, etc.

4909 SPRUCE HILL #400-700

City & State

TAMPA

FL

City & State

CANTON

OH

Zip

33612

Country

Zip

44718

Country

4. FEI Number

294763444

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$5.00 Additional
Fee Required

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**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

ROBERT J. EVERETT

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

13336 N. CENTRAL AVE

City

TAMPA

FL

Zip Code

33612

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.

4/18/02
DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Joseph F. DANIELE, MEMBER

13336 N. CENTRAL AVE

TAMPA FL 33612

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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

4/18/02
Date

3302395169
Daytime Phone #

CR2E083B (12/01)