

2002 **LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90167 028 ****50.00

DOCUMENT # L01000021206

1. Entity Name

EAST COAST HANGARS, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3033 Riviera Drive

Suite, Apt. #, etc.

Suite 201

City & State

Naples, Florida

Zip

34103

Country

USA

3. Mailing Address

3033 Riviera Drive

Suite, Apt. #, etc.

Suite 201

City & State

Naples, Florida

Zip

34103

Country

USA

4. FEI Number

04-3589291

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

David G. Budd

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

3033 Riviera Drive, Suite 201

City

Naples

FL

Zip Code

34103

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.

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	Operating Manager/Treasurer Sheldon W. Starman 4099 Tamiami Trail North, Suite 400 Naples, FL 34103	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Assistant Operating Manager/Secretary David G. Budd 3033 Riviera Drive, Suite 201 Naples, FL 34103	TITLE NAME 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)(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:

David G. Budd

3/12/02

(941) 263-7700

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

Date

Daytime Phone #

CR2E083B (12/01)