

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

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90086 011 *****50.00

DOCUMENT # L01000021721

1. Entity Name

FORESTLAKE APARTMENTS, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

132 FOREST LAKE BLVD

3. Mailing Address

4201 N. OCEAN DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#605

DO NOT WRITE IN THIS SPACE

CITY STATE DAYTONA BEACH FL

CITY STATE HOLLYWOOD, FL

4. FEI Number 01-0565711

Applied For
Not Applicable

Zip 32119

Country USA

Zip 33019

Country USA

5. Certificate of Status Desired ☐

\$5.00 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name PAUL R. SUSSMAN

Street Address (P.O. Box Number is not acceptable) 4201 N. OCEAN DR.

APT #605

City HOLLYWOOD

FL

Zip 33019

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 MEMBER
NAME PAUL SUSSMAN
STREET ADDRESS 4201 N. OCEAN DR. #605
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MEMBER
NAME JOHN MASSALACQUA
STREET ADDRESS 4201 N. OCEAN DR. #603
CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE MANAGER
NAME SUNBELT DEVELOPMENT CORP.
STREET ADDRESS 4201 N. OCEAN DR. #605
CITY-ST-ZIP HOLLYWOOD, FL 33019

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**DO NOT WRITE
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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.

PAUL R. SUSSMAN

SIGNATURE:

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

2/10/02 (954) 920-6071

Date Daytime Phone #

CR2E083B (12/01)