## LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

L01000021866

BANKATLANTIC VENTURE PARTNERS 1, LLC.

DOCUMENT #

1. Entity Name

Zip

## FILED May 15, 2002 8:00 am Secretary of State

05-15-2002 90133 025 \*\*\*\*50.00

## DO NOT WRITE IN THIS SPACE

9 6 1 6 2 6

2. Principal Place of Business
73. Mailing Address
P.O. BOX 5403

1750 Fe. ARI N SE BLVD., 3RD FLOOR
FT. LAUDERDALE, FL 33310-5403
City & State

DO NOT WRITE IN THIS SPACE

& State

City & State

4. FEI Number
59-2697180

Not Applied For
59-2697180

Not Applicable

5. Certificate of Status Desired
Fee Required

7. Name and Address of Current Registered Agent

## DO NOT WRITE IN THIS SPACE

1	7. Name and Address of Current Registered Agent					
Name		R. G			_ <del></del>	
Street A	Address (P.O., Bo)	Number is Not A	Acceptable)	BC	VD.	
. !						
City .	ET LOW	DEODA		FI	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 print in name of registered agent and title if applies. Wice President

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS MERM TITLE TITLE NAME LEVITT COMPANIES, LLC STREET ADDRESS 1750 E SUNPISE BLVD STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE, FL 33304 CITY-ST-ZIP TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE CITY-ST-ZIP CITY-ST-ZIP TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

GER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE:

GLEN R. GILBERT

Executive Vice President

4/24/2002

Daytime Phone #