## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## **FILED** May 05, 2003 8:00 am Secretary of State 05-05-2003 92180 019 \*\*\*\*50.00

1. Entity Natr EQUITY I	EQUITY HOLD, se of Business	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	61	_	
2. Principal P	Pace of Business	3. Mailing Address	rs.	-	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
City & State		City & State		4. FEI Number Applied For 75 3016437 Not Applied	ble
Ζiρ	Country	Zip	Country	5. Certificate of Status Desired	
	6. Name and Address of Curren	nt Registered Agent	Name	7. Name and Address of New Registered Agent	긔
BOLANOS TRUXTON, P.A. 12800 UNIVERSITY DR., STE. 340 FORT MYERS, FL 33907				Street Address (P.O. Box Number is Not Acceptable)	
			City	FL Zip Code	$\dashv$
SIGNATURE .	Signature, apout ordinard name of registered and  MANAGING MEMI	FILE NO Make Check Payabl	Registered Agents ignature requirements of the Property of the		ion
NAME	FOLINO, JOHN 125 HILLVUE LANE PITTSBURGH, PA 15237		NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	111LE NAME STREET ADDRESS CITY -ST-21P	☐ Change ☐ Additi	an
NAME STREET ADDRESS CITY-ST-2IP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Additi	on
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1:TLE NAME STREET ADDRESS CITY-ST-2IP	☐ Change ☐ Addition	On
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	1 ITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Additi	σn
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	11TLE NAME STREET ADDRESS CITY-ST-2IP	☐ Change ☐ Addib	
indicated	ertify that the information supplied wi on this report is true and accurate an bility company or the receiver or trust	d that my signature shall have to	he same legal effect as if	Section 119.07(3)(i), Florida Statutes. I further certify that the information i made under oath; that I am a managing member or manager of the upter 606, Florida Statutes.	