


2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

0019557

DOCUMENT # L02000000791

1. Entity Name
LONGBOAT GLOBAL FUNDS MANAGEMENT, L.L.C.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 SEP 25 AM 11:39

WL9/26

Principal Place of Business
**417 12TH ST W
SUITE 213
BRADENTON FL 34205**

Mailing Address
**417 12TH ST W
SUITE 213
BRADENTON FL 34205**



2. Principal Place of Business
**2 N. Tamiami Trail
Ste 1200
Sarasota, FL
34236 USA**

3. Mailing Address
**2 N. Tamiami Trail
Ste 1200
Sarasota
FL USA**

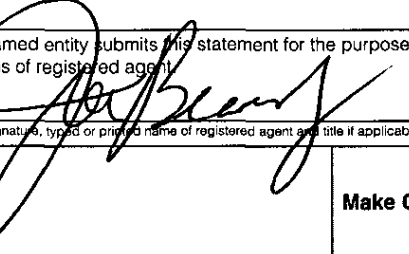
4. FEI Number
65-1095808

5. Certificate of Status Desired ☐ **\$5.00 Additional Fee Required**

6. Name and Address of Current Registered Agent
**PERRON, ANDRE R ESQ
OZARK & PERRON PA
2808 MANATEE AVE W
BRADENTON FL 34205**

7. Name and Address of New Registered Agent
Name **Robert Joseph Beasley**
Street Address (P.O. Box Number is Not Acceptable)
**2 N. Tamiami Trail
Ste 1200
Sarasota FL 34236**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE  DATE **9-23-03**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By September 24, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE MANAGER	<input type="checkbox"/> Delete
NAME ROBERT JOSEPH Beasley	
STREET ADDRESS 2 N. Tamiami Trail Ste 1200	
CITY-ST-ZIP SARASOTA FL 34236	

10. ADDITIONS/CHANGES

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

500023349805
09/25/03--01112--003 **157.50

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:  **SIGNATURE REQUIRED** DATE **9-23-03**

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

CR2E083 (4/03)