

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90120 018 *****50.00

DOCUMENT # L02000019415

1. Entity Name

HILLSBORO EXECUTIVE PARK LLC



Principal Place of Business

**2423 ALHAMBRA CIRCLE
CORAL GABLES FL 33134**

Mailing Address

**2423 ALHAMBRA CIRCLE
CORAL GABLES FL 33134**

2. Principal Place of Business

**c/o Elizabeth Hoover
Suite, Apt. #, etc.
2700 Alhambra Circle**

3. Mailing Address

**c/o Elizabeth Hoover
Suite, Apt. #, etc.
2700 Alhambra Circle**

**City & State
Coral Gables, FL**

**City & State
Coral Gables, FL**

**Zip Country
33134**

**Zip Country
33134**

4. FEI Number
55-0789210

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**MOODY, BRENT ESQ
515 EAST LAS OLAS BOULEVARD
FORT LAUDERDALE FL 33301**

7. Name and Address of New Registered Agent

**Name Thomas, Bradford A Esq
Street Address (P.O. Box Number is Not Acceptable)
6161 Blue Lagoon Dr
Suite 350
City Miami FL Zip Code 33126**

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 the registered agent.

SIGNATURE

Bradford A. Thomas

4/11/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

**TITLE MGR
NAME HOOVER, JOHN W
STREET ADDRESS 2423 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL 33134** ☐ Delete

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete

**TITLE
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CITY-ST-ZIP** ☐ Delete

**TITLE
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CITY-ST-ZIP** ☐ Delete

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Delete

10. ADDITIONS/CHANGES

**TITLE
NAME Hoover, John W Jr.
STREET ADDRESS
CITY-ST-ZIP** ☒ Change ☐ Addition

**TITLE MGR
NAME Capi, Andre S
STREET ADDRESS 3300 NE 56th Ct, Ft. Lauderdale, FL 33308
CITY-ST-ZIP** ☐ Change ☒ Addition

**TITLE MGR
NAME Northcutt, Tom
STREET ADDRESS 3241 NE 56th Ct
CITY-ST-ZIP Ft. Lauderdale, FL 33308** ☐ Change ☒ Addition

**TITLE MGR
NAME Rappaport, Melbourne
STREET ADDRESS 5546 Croydon Court
CITY-ST-ZIP Boca Raton, FL 33486** ☐ Change ☒ Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP** ☐ Change ☐ Addition

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: John W Hoover, Jr, Manager 4/14/03 305-642-6220 ext 151

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

Date

Daytime Phone #

CR2E083 (10/02)