2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000021791

COMO PROPERTIES, LLC



Apr 17, 2003 8:00 am Secretary of State
04-17-2003 90033 044 ****50.00 **FILED**

			*	GO WE TE					
Principal Plac	ce of Business	Mailing Address			7				
1645 PALM BEACH LAKES BLVD SUITE 250 WEST PALM BEACH FL 33401		1645 PALM BEACH LAKES BLVD SUITE 250 WEST PALM BEACH FL 33401							
		<u> </u>			1201	(1 8 1) 81) 88) 8 (1 8) 88) (1 8)	11 ()(12)(1 ())	(2) ((8) (3)	18181 2161 1861
2. Principal F	Place of Business	3. Mailing Address			 				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State		City & State		4. FEI Nur	mber 43-19715	573	_ 	pplied For lot Applicable	
Zip Country USA		Zip	Country		5. Certifica	ate of Status Desired		\$5.00 Ad Fee Require	ditional
	6. Name and Address of Current	Registered Agent	=	ين رسيدر ۱۰۰ مهارو ۱۰۰	 ≏~7. ·Name a	nd Address of New Re		•	
ADA	AOUD ALAN I II			Name					
ARMOUR, ALAN I II 1645 PALM BEACH LAKES BLVD., SUITE 250 WEST PALM BEACH FL 33401			İ	Street Address (P.O. Box Number is Not Acceptable)					
AAE:	SI PALM DEAUTI PL 33401				•				
				City		 -	FL	Zip Cod	e
8. The above	named entity submits this statement fo	r the purpose of changing its	registere	ed office or registe	ered agent, or I	ooth, in the State of Flor	. –	 amiliar with,	, and accept
the obligat	ions of registered agent.								
SIGNATURE .	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE	: Registered	Agent signature require	ad when reinstation)		DATE		
						1	DAIL		
		Make Check Payable		EE IS \$50.00				,	
		1		ny 1, 2003	ent or state				
9.	MANAGING MEMBE		10.	., .,		ADDITIONS/0	CHANGES		
TITLE	MEMBER	☐ Delete	TITLE			ADDITIONOT		☐ Change	Addition
NAME	EDWARD M. RICCI		NAME					c.ia.ige	
STREET ADDRESS	19670 LOXAHATCH	EE RIVER ROAD		ET ADDRESS					
CITY-ST-ZIP	JUPITER, FL 33	<u>458</u>	CITY-	ST-ZIP					
TITLE NAME	MEMBER	☐ Delete	TITLE					☐ Change	☐ Addition
STREET ADDRESS	MARY E. LUPO RI 19670 LOXAHATCH	CCI FF DIVED DOAD	NAME	ET ADDRESS					
CITY-ST-ZIP		458		ST-ZIP					
TITLE	MEMBER	Delete Delete	TITLE			نسو محند د کی ادو وحق د		Change	☐ Addition
NAME	THEODORE J. LEO	·	NAME	:					
STREET ADDRESS	85 SANDBOURNE L	4	STREE	T ADDRESS					
CITY-ST-ZIP	PALM BEACH GARD	ENS. FL 33418	CITY-	ST-ZIP					
TITLE	ROSLYN LEOPOLD	☐ Delete	TITLE			-	•	Change	Addition
NAME	85 SANDBOURNE LA	ANE	NAME						
STREET ADDRESS CITY-ST-ZIP	PALM BEACH GARD	ENS, FL 3341	×	T ADDRESS ST-ZIP					
	WEWDER :		1-	 -				<u> </u>	
TITLE NAME	MEMBER	☐ Delete	TITLE					☐ Change	☐ Addition
STREET ADDRESS	BRIAN HASS	•	•	T ADDRESS					
CITY-ST-ZIP	2165 RADNOR ROAL NORTH PALM BEACH			ST-ZIP					
TITLE	MEMBER	Delete	TITLE	<u> </u>				☐ Change	Addition
NAME	ANDREA HASS	, La Deligité	NAME				ļ	— Suminge	Addition
STREET ADDRESS	2165 RADNOR ROAL)	STREE	T ADDRESS					
CITY-ST-ZIP	NORTH PALM BEACH		CITY-	ST-ZIP					
11. Thereby co	ertify that the information supplied with		the exem	ontion stated in Se	ection 119 07/3	(Ni) Florida Statutos I f	urther certif	v that the ir	oformation

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:

561-684-6500