

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2003 8:00 am
Secretary of State

04-28-2003 90105 001 ****50.00

DOCUMENT # L02000027979



1. Entity Name

PORT LARGO RESORT, LLC

Principal Place of Business

**2645 EAST DANIA BEACH BOULEVARD
DANIA BEACH FL 33004**

Mailing Address

**2645 EAST DANIA BEACH BOULEVARD
DANIA BEACH FL 33004**

44002308



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

**%Atlantia Holdings
645 E. Dania Beach Blvd.
Dania Beach, FL 33004**

3. Mailing Address

**%Atlantia Holdings
645 E. Dania Beach Blvd.
Dania Beach, FL 33004**

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**BLACKBURN, ACE J JR.
C/O COONEY MATTON, ET AL
2312 WILTON DRIVE
FORT LAUDERDALE FL 33305**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

SIGNATURE

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.

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**Managing Member
Blackburn Jr., A.
%Atlantia Holdings, 645 E. Dania Beach Blvd.
Dania Beach, FL 33004**

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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10.

ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ 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:

SIGNATURE REQUIRED

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

4/15/03

Date

Daytime Phone #

CR2E083 (10/02)