LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED May 14, 2003 8:00 am Secretary of State

04-25-2003	90759	011	****50	0

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DOCUME 1. Entity Name	NT # L0200003	3229	- }						
TRADITION	CONSTRUCTION,	LLC				į			
DO	NOT WRITE	IN THIS S	PAC	E	44001	589			
2. Principal Place of	Business	3. Mailing Address		· I I A 🖜					
Suite, Apt. #, etc.	<u>Sunrise Blvd.</u> oor	Suite, Apt. #, elc.	P.O. Box 5403 Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State Fort ha	uderdale, FL	Ft. Lande		, FL	4. FEI Number 72-1549761			Applied For Not Applicable	
Zip 333	OY USA	33310	Count	ΑŽ	5. Certificate of Status Desired		5.00 88 Req	Additional uired	
					7. Name and Address of Current I	Registered /	\gent_		
	DO NOT W	(DITE		Name GI	bert, Glen R) 	•		
	DO NOT W			Street Address (I	P.O. Box Number is Not Acceptable	Bluc	1.		
	IN THIS SE	ACE		ard	Floor				
				City Fort	haudendale	FL	Zip	Code 04	
		or the purpose of changing it	s registere		ad agent, or both, in the State of Flor	ida. I am fan	iliar wi	th, and accept	
the obligations of	registered agent.	- .			5/9	03			
SIGNATURE Signature	e, typed or printed name of registered agent	t and title if applicable.			· '	DATE			
•		Make Check Paya	FEE IS SE IO FR DUE BY	xide Departmer	nt of State				
9.	MANAGING MEMBI	ERS/MANAGERS	300				1924		
TITLE MG	SRM ve Communi	ties.LLC	NAME					(1200)	
STREET ADDRESS 17	re Communi 30 East Syn	rise Blud.	STREET	TACORESS					
CIT-SI-ZIF F	ort Landerdale	, FL 33304	CIT	S-28 - 1 - 2	<u> </u>			CRZENBAB	
TITLE		•	NAME	27-25-45 - B 1-40 W. 20-83				S	
STREET ADDRESS			10000000	TADORESS ST. ZP.					
CITY-ST-ZIP TITLE			Sime.					en e	
NAME			NAME						
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STREET ADDRESS CITY-ST-ZIP			All arrival land	T AOORESS 51 - 78 - 33					
TITLE									
NAME STREET ADDRESS			700 300 300	ADDRESS					
CITY-ST-ZIP				51.74° (C. 1855)					
 I hereby certify the indicated on this limited liability con 	nat the information supplied with report is true and accurate and impany or the receiver or truster	this filing does not qualify to that my signature shall have the CPCN COLLEGE	r the exem the same report as	nption stated in Sec legal effect as if ma required by Chapte	tion 119.07(3)(i), Florida Statutes. I f ade under oath; that I am a managir or 608, Florida Statutes.	urther certify ng member o	that the	e information ager of the	

Executive Vice President

SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

SIGNATURE: