

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90160 046 ****50.00

DOCUMENT # L95000000752

1. Entity Name

QUARTERDECK PROPERTIES, L.C.

Principal Place of Business

**1541 CORDOVA RD
 FT. LAUDERDALE FL 33316**

Mailing Address

**1541 CORDOVA RD
 FT. LAUDERDALE FL 33316**

2. Principal Place of Business

1015 SE 16th St.

3. Mailing Address

1015 S.E 16th St.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ft. Lauderdale, FL

City & State

Ft. Lauderdale, FL

4. FEI Number

65-0628251

Applied For

Not Applicable

Zip

33316

Country

USA

Zip

33316

Country

USA

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**FLANAGAN, PAUL B
 1541 CORDOVA ROAD
 FT. LAUDERDALE FL 33316**

Address Change only →

7. Name and Address of New Registered Agent

Name **Flanigan, Paul B.**

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

1015 SE 16th St.

City **Ft. Lauderdale**

FL

Zip Code **33316**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

[Signature]

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS

TITLE NAME Delete
MGRM FLANIGAN, PAUL B
 STREET ADDRESS **1541 CORDOVA RD.**
 CITY-ST-ZIP **FT. LAUDERDALE FL 33316**

TITLE NAME Delete
MEM BUFFALO HOLDINGS, INC.
 STREET ADDRESS **658 W INDIANTOWN RD #204**
 CITY-ST-ZIP **JUPITER FL 33458**

TITLE NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE NAME Change Addition
MGRM FLANIGAN, PAUL B.
 STREET ADDRESS **1015 SE 16th St.**
 CITY-ST-ZIP **Ft. Lauderdale, FL 33316**

TITLE NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE NAME Change Addition
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 CITY-ST-ZIP

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TITLE NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

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]

DATE **3/27/02**

DAYTIME PHONE # **954-525-8042**

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

Date

Daytime Phone #

CR2E083 (9/01)