

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000001262

1. Entity Name

SARASOTA TRADE PARK INVESTMENTS, LLC

Principal Place of Business

2363 INDUSTRIAL BOULEVARD
SARASOTA FL 34234

Mailing Address

2363 INDUSTRIAL BOULEVARD
SARASOTA FL 34234-3121

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

05-0948386

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FROST, KLAUS

2363 INDUSTRIAL BOULEVARD
SARASOTA FL 34234

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.

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 Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MGRM FROST, KLAUS
STREET ADDRESS 2268 HIBISCUS STREET
CITY- ST- ZIP SARASOTA FL 34234 ☐ Delete

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

TITLE NAME MGRM BURBOL, CHARLES J
STREET ADDRESS 1209 SEA PLUME WAY
CITY- ST- ZIP SARASOTA FL 34242 ☐ Delete

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

TITLE NAME MGRM MYERS, MARTIN
STREET ADDRESS 13353 NORTH BRANCH ROAD
CITY- ST- ZIP SARASOTA FL 34240 ☐ Delete

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

TITLE NAME MGRM BROWNING, RICARD
STREET ADDRESS 9703 BRADEN RUN
CITY- ST- ZIP BRADENTON FL 34202 ☐ Delete

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

TITLE NAME MGRM BICK, MAURICE
STREET ADDRESS 470 FRELINGHUYSEN AVENUE
CITY- ST- ZIP NEWARK NJ 07114 ☐ Delete

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

TITLE NAME MGRM MORTON A. SEIGLER REVOCABLE LIVING TRUST
STREET ADDRESS 435 L'AMBIANCE DRIVE (M608)
CITY- ST- ZIP LONGBOAT KEY FL 34228 ☐ Delete

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

APPROVED
AND
FILED

00 MAY 25 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

CR2E08: (999)