

File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

LIMITED LIABILITY COMPANY
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

19 MAY -3 PM 5:00

RECEIVED

FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee
\$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address
of Limited Liability Company

DOCUMENT # L98000002899

ACF MANAGEMENT, L.L.C.
100 North Tampa Street
Suite 2410
Tampa, Florida 33602

1a. Principal Place of Business Address

100 North Tampa Street
Suite 2410
Tampa, Florida 33602

2 Principal Place of Business

2a. Mailing Address

3. Date Organized or Qualified

3a. State of Formation

11/30/98

FL

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

☒ Applied For

☐ Not Applicable

City & State

City & State

5. Date of Last Report

6. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

Zip

Country

Zip

Country

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent/Office

DUNBAR, MARC W
215 SOUTH MONROE STREET, 2ND FLOOR
TALLAHASSEE FL 32301

Name

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

Suite, Apt. #, etc.

City

Zip Code

FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

Registered agent's full name and address. (NOTE: Registered agent's signature required when this is on)

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM BROWN, CRICHTON W

345 BAYSHORE BOULEVARD, AP TAMPA FL

MGRM STULL, STEVEN T

909 POYDRAS STREET, SUITE NEW ORLEANS LA

MGRM BERGMANN, DAVID W

7733 FORSYTH BOULEVARD, SU ST. LOUIS MO

MGRM ZAJAC, SCOTT A

7733 FORSYTH BOULEVARD, SU ST. LOUIS MO

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****188.75 ****188.75

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual 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, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE: *Crichton W. Brown*

Crichton W. Brown

4/29/99

SIGNATURE AND PRINTED NAME OF LIMITED LIABILITY COMPANY MEMBER OR MANAGER

Date

Daytime phone