

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L98000002899

1. Entity Name
ACF MANAGEMENT, L.L.C.

Principal Place of Business
100 N. TAMPA ST., SUITE 2410
TAMPA FL 33602

Mailing Address
100 N. TAMPA ST., SUITE 2410
TAMPA FL 33602-5809

2. Principal Place of Business
Same as above
Suite, Apt. #, etc.

3. Mailing Address
Same as above
Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-3542907

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name
Timothy G. Cockshutt
Street Address (P.O. Box Number is Not Acceptable)
100 N. Tampa Street
Suite 2410
City Tampa FL Zip Code 33602

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 *Timothy G. Cockshutt* Timothy G. Cockshutt, Member of Advantage Capital FL GP I, LLC
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 4/20/00

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

800003256698--8
-05/18/00--01012--018
*****50.00 *****50.00

9. MANAGING MEMBERS/MEMBERS

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	<input type="checkbox"/> Delete
	MGRM BROWN, CRICHTON W	345 BAYSHORE BOULEVARD, APT. 1513	TAMPA FL 33606	<input type="checkbox"/>
	MGRM STULL, STEVEN T	909 POYDRAS STREET, SUITE 2230	NEW ORLEANS LA 70112	<input type="checkbox"/>
	MGRM BERGMANN, DAVID W	7733 FORSYTH BOULEVARD, SUITE 1850	ST. LOUIS MO 63105	<input type="checkbox"/>
	MGRM ZAJAC, SCOTT A	7733 FORSYTH BOULEVARD, SUITE 1850	ST. LOUIS MO 63105	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

10. ADDITIONS/CHANGES

TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	MGRM Brown, Crichton W.	100 N. Tampa Street, Suite 2410	Tampa, FL 33602	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

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: *Timothy G. Cockshutt* SIGNATURE REQUIRED
By: *Timothy G. Cockshutt* Secretary of State
Advantage Capital FL GP I, LLC
P.O. Box 1000000, Tallahassee, FL 32301-1000
P.O. Box 1000000, Tallahassee, FL 32301-1000

4/20/00 (813) 221-8700

Date

Daytime Phone #

CR2E083 (9/99)