

2000 UNIFORM BUSINESS REPORT (UBR)

0001803 AF

DOCUMENT # L99000000273

1. Entity Name
TRIAD HOUSING PARTNERS OHIO I, L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB 17 AM 10:20

Principal Place of Business
2450 HOLLYWOOD BLVD., SUITE 503
HOLLYWOOD FL 33020

Mailing Address
2450 HOLLYWOOD BLVD., SUITE 503
HOLLYWOOD FL 33020-6626



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-0887535

Applied For
Not Applicable

Zip Country Zip Country

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

SCHULTZ, DAVID A
10101 SOUTHWEST 5TH STREET
PLANTATION FL 33324

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
STREET ADDRESS
CITY - ST - ZIP

MGRM
SCHULTZ, DAVID
10101 SOUTHWEST 5TH STREET
PLANTATION FL 33324

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MEMBER
Oliver B. Pfeffer
2450 Hollywood Blvd, #503
Hollywood, FL 33020

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MEMBER
DAVID M. REICH
2450 Hollywood Blvd, #503
Hollywood, FL 33020

☐ Change ☒ Addition

TITLE
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☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #

David A. Schultz
DAVID A. SCHULTZ

2/15/00

954-929-7199

CR2E083 (9/99)