

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90006 013 ****50.00

DOCUMENT # L99000002024

1. Entity Name
ROYAL ADMIRALTY, LLC



Principal Place of Business
**8889 PELICAN BAY BOULEVARD, SUITE 201
NAPLES FL 34108**

Mailing Address
**8889 PELICAN BAY BOULEVARD, SUITE 201
NAPLES FL 34108**

2. Principal Place of Business
8889 Pelican Bay Boulevard
Suite, Apt. #, etc.
Suite 201

3. Mailing Address
8889 Pelican Bay Boulevard
Suite, Apt. #, etc.
Suite 201

City & State
Naples, FL

City & State
Naples, FL

Zip Country
34108-7503 U.S.A.

Zip Country
34108-7503 U.S.A.

4. FEI Number **59-3571877**

Applied For
☐ Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**AUTERA, MICHAEL E
8889 PELICAN BAY BOULEVARD, SUITE 201
NAPLES FL 34108**

7. Name and Address of New Registered Agent

Name
Michael E. Autera
Street Address (P.O. Box Number is Not Acceptable)
8889 Pelican Bay Boulevard
Suite 201
City **Naples** FL Zip Code **34108-7503**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **Michael E. Autera as Manager of Royal Admiralty, LLC** **4/1/03**
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 Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

TITLE **MGR** ☐ Delete
NAME **AUTERA, MICHAEL E**
STREET ADDRESS **8889 PELICAN BAY BOULEVARD, SUITE 201**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE **MGR** ☐ Delete
NAME **AUTERA, MARTHA T**
STREET ADDRESS **8889 PELICAN BAY BOULEVARD, SUITE 201**
CITY-ST-ZIP **NAPLES FL 34108**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE **MGR** ☒ Change ☐ Addition
NAME **Autera, Michael E.**
STREET ADDRESS **8889 Pelican Bay Boulevard, Suite 201**
CITY-ST-ZIP **Naples, FL 34108-7503**

TITLE **MGR** ☒ Change ☐ Addition
NAME **Autera, Martha T.**
STREET ADDRESS **8889 Pelican Bay Boulevard, Suite 201**
CITY-ST-ZIP **Naples, FL 34108-7503**

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

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

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

TITLE ☐ Change ☐ Addition
NAME
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]* **Michael E. Autera as Manager of Royal Admiralty, LLC**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

4/1/03
Date

239-566-1400
Daytime Phone #

CR2E083 (10/02)