

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

0009032 AF

DOCUMENT # L99000002584

1. Entity Name
ADMIRALTY CAPITAL, LLC

00 APR 24 PM 12:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
PELICAN BAY FINANCIAL CENTER PELICAN BAY FINANCIAL CENTER
8889 PELICAN BAY BOULEVARD, SUITE 201 8889 PELICAN BAY BOULEVARD, SUITE 201
NAPLES FL 34108 NAPLES FL 34108-7503



2. Principal Place of Business 3. Mailing Address
8889 Pelican Bay Blvd. 8889 Pelican Bay Blvd.
Suite, Apt. #, etc. Suite, Apt. #, etc.
Suite 201 Suite 201
City & State City & State
Naples, FL Naples, FL

MTM

DO NOT WRITE IN THIS SPACE

Zip Country Zip Country
34108 U.S.A. 34108 U.S.A.
4. FEI Number 59-3590842 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
AUTERA, MICHAEL E Name Autera, Michael E.
PELICAN BAY FINANCIAL CENTER Street Address (P.O. Box Number is Not Acceptable) 8889 Pelican Bay Blvd.
8889 PELICAN BAY BOULEVARD, SUITE 201 Suite 201
NAPLES FL 34108 City Naples FL Zip Code 34108

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 Michael E. Autera as Manager of Royal Admiralty, LLC;
General Partner of Admiralty Partners, LP; 4/18/00
Signature, typed or printed name of registered agent and client applicable (Not to be used for registered agent who is not a natural person) DATE

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

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE	MGRM	<input type="checkbox"/> Delete	TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADMIRALTY PARTNERS, L.P.		NAME	Admiralty Partners, L.P.	
STREET ADDRESS	C/O 8889 PELICAN BAY BLVD., STE 201		STREET ADDRESS	8889 Pelican Bay Blvd., Suite 201	
CITY-ST-ZIP	NAPLES FL 34108		CITY-ST-ZIP	Naples, FL 34108	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

100003245591--6
-05/09/00--01121--009
*****50.00 *****50.00

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: Michael E. Autera as Manager of Royal Admiralty, LLC;
General Partner of Admiralty Partners, LP;
Member of Admiralty Capital, LLC 4/18/00 941-566-1414
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #

CR2E083 (9/99)