

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 22, 2002 8:00 am**  
**Secretary of State**

05-22-2002 90231 015 \*\*\*\*50.00

**DOCUMENT # L99000002993**

1. Entity Name  
**LACROSSE PARTNERS LLC**

Principal Place of Business  
**701 BRICKELL AVENUE, SUITE 3000**  
**MIAMI FL 33131**

Mailing Address  
**701 BRICKELL AVENUE, SUITE 3000**  
**MIAMI FL 33131**

2. Principal Place of Business  
**260 N.W. 131<sup>ST</sup> AVE**

3. Mailing Address  
**260 N.W. 131<sup>ST</sup> AVE**

Suite, Apt. #, etc.

City & State  
**PLANTATION FLORIDA**

City & State  
**PLANTATION FLORIDA**

Zip  
**33325**

Country  
**USA**

4. FEI Number **NOT APPLICABLE**

Applied For  
☒ Not Applicable

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

## 6. Name and Address of Current Registered Agent

**INTRASTATE REGISTERED AGENT CORPORATION**  
**701 BRICKELL AVENUE, SUITE 3000**  
**MIAMI FL 33131**

## 7. Name and Address of New Registered Agent

Name  
**STUART K. HOFFMAN ESQ.**

Street Address (P.O. Box Number is Not Acceptable)  
**40 HUNTON & WILLIAMS**  
**1111 BRICKELL AVENUE SUITE 2500**

City  
**MIAMI**

FL Zip Code  
**33131**

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 **Richard A. Nash as MGR.** **4-26-02**

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**  
**Due By May 1, 2002**

## 9. MANAGING MEMBERS/MANAGERS

TITLE  
**MGR**

NAME  
**NASH, RICHARD A**

STREET ADDRESS  
**701 BRICKELL AVENUE, SUITE 3000**

CITY-ST-ZIP  
**MIAMI FL 33131**

☒ Delete

## 10. ADDITIONS/CHANGES

TITLE  
**MGR**

NAME  
**NASH, RICHARD A**

STREET ADDRESS  
**1111 BRICKELL AVENUE SUITE 2500**

CITY-ST-ZIP  
**MIAMI, FLORIDA 33131**

☒ Change ☐ Addition

TITLE  
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 STREET ADDRESS  
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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: **Richard A. Nash (MGR)** **4-26-02** **954-423-4188**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

CR2E083 (9/01)