

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 27, 2001 08:00 AM****Secretary of State****DOCUMENT # L99000004538**

1. Entity Name

ST. PETERSBURG ALF INVESTMENTS LLC

Principal Place of Business

THE GLADES BUILDING, SUITE 303
877 EXECUTIVE CENTER DRIVE WEST
ST PETERSBURG FL
33702

Mailing Address

THE GLADES BUILDING, SUITE 303
877 EXECUTIVE CENTER DRIVE WEST
ST PETERSBURG FL
33702

2. Principal Place of Business

THE KRESS BUILDING, SUITE M-8

3. Mailing Address

THE KRESS BUILDING, SUITE M-8

Suite, Apt. #, etc.

475 CENTRAL AVENUE

Suite, Apt. #, etc.

475 CENTRAL AVENUE

City & State

ST PETERSBURG FL

City & State

ST PETERSBURG FL

4. FEI Number

59-3646643

Applied For

Not Applicable

Zip

33701

Country

US

Zip

33701

Country

US

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

MASCARA ERNEST L
THE GLADES BUILDING SUITE 303
877 EXECUTIVE CENTER DRIVE WEST
ST PETERSBURG FL
33702

7. Name and Address of New Registered Agent

Name

MASCARA ERNEST L

Street Address (P.O. Box Number is Not Acceptable)

THE KRESS BUILDING, SUITE M-8

475 CENTRAL AVENUE

City

ST PETERSBURG

FLZip Code
33701

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 **ERNEST L. MASCARA****04/27/2001**

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

TITLE MGR ☐ Delete
NAME GERAETS JOHANNES F
STREET ADDRESS 421 FOURTH AVENUE NORTH
CITY-ST-ZIP ST PETERSBURG FL 33701TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS / CHANGES

TITLE MGR ☒ Change ☐ Addition
NAME GERAETS JOHANNES F
STREET ADDRESS 421 FOURTH AVENUE NORTH
CITY-ST-ZIP ST PETERSBURG FL 33701TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
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CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ 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: **JOHANNES F. GERAETS**

MGR

04/27/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (11/00)