

2000 UNIFORM BUSINESS REPORT (UBR)

0005039 AF

DOCUMENT # L99000005675

1. Entity Name
MLS REGENCY APARTMENTS L.L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 FEB -7 PH 2:06

Principal Place of Business

2716 N.E. 16TH STREET
FT LAUDERDALE FL 33304

Mailing Address

2716 N.E. 16TH STREET
FT LAUDERDALE FL 33304-1619



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BLODIG, GREGORY J
100 WEST CYPRESS CREEK RD., STE 700
FT LAUDERDALE FL 33309

7. Name and Address of New Registered Agent

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

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	SWANEY, MICHAEL	
STREET ADDRESS	2716 N.E. 16TH STREET	
CITY-ST-ZIP	FORT LAUDERDALE FL	
TITLE		<input type="checkbox"/> Delete
NAME		
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10.

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CITY-ST-ZIP	

ADDITIONS/CHANGES

☐ Change ☒ Addition

Zip code → 33304

0000002131240--8

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*****50.00 *****50.00

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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.

Michael L. Swaney

SIGNATURE:

Michael L. Swaney
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

2/3/00

Date

954-567-3296

Daytime Phone #

CR2E083 (9/99)