

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L99000005957

1. Entity Name
MASSE PROPERTIES, L.L.C.

FILED

00 JAN 18 PM 2:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business
1800 NORTHGATE BOULEVARD, SUITE A8
SARASOTA FL 34234

Mailing Address
1800 NORTHGATE BOULEVARD, SUITE A8
SARASOTA FL 34234-2142

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PFLUGNER, J. GEOFFREY
2033 MAIN STREET, SUITE 101
SARASOTA FL 34237

Name MARIO L. COMPARETTO
Street Address (P.O. Box Number is Not Acceptable)
1800 NORTHGATE BLVD, A-8
City SARASOTA FL 34234

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: Mario Comparetto
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE: 1/13/99

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

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

MGR
MCDONOUGH, DONALD
1800 NORTHGATE BOULEVARD, SUITE A8
SARASOTA FL 34234 ☐ Delete

TITLE
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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.

SIGNATURE: Mario Comparetto
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Date

Daytime Phone #