2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

U	HIFORM BUSINE	SS REPORT	(UBR)	<u> </u>	
DOCUMENT # L9900007696 1. Entity Name				FILED	
BACCHIO	CCHI REALTY, L.C.	MENDEDX	O VI	03 SEP 30 PM 3: 58	i.b
	ee of Business	Mailing Address		SECRETARY OF STATE TALLAHASSEE FLORIDA	W)
2 USHER ST. MILFORD CT 00	6460	2 USHER ST. MILFORD CT 06460		TALLAHASSILL LOWE	
ł				I INDRINGE BED INCHES BERLING BOTH BOTH BOTH BOTH BOTH BOTH BOTH BOTH	
2. Stincipal Place of Business Rd.		3. Mailing Address 70	WNE TO		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES	
Ciy & Stat	SHIRE, LONN.	Cityle State Vinus		4. FEI Number 58-5643951 Applied For Not Applica	
Do U	Country	06410	Country SA	5. Certificate of Status Desired See Required Fee Required	
	6. Name and Address of Current R	egistered Agent		7. Name and Address of New Registered Agent	
FOX, GREGORY A ESQ.					
28050 U.S. 19 NORTH, SUITE 100			Street Address (P.O. Box Number is Not Acceptable)		
CLEA	ARWATER FL 33761				
			City	FL Zip Code	
		the purpose of changing its req	gistered office or regi	gistered agent, or both, in the State of Florida. I am familiar with, and acce	pt
the obligat	ions of registered agent. Signature, typed or printed name of registered agent an	d title if applicable (NOTE: R	egistered Agent signature req	500023444845 09/30/0301054005 **50,00	
	Cigroticity, ypot or printed table or regional as again as	1	/!!! FEE IS \$50.0		\neg
	 ♥ -**,**,	Make Check Payable t	o Florida Departr	tment of State	
			eptember 24, 200	·	
9. TITLE	MANAGING MEMBER	S/MANAGERS Delete	10.	ADDITIONS/CHANGES Reference Additional Addi	tion
NAME	BACCHIOCCHI, EDWARD	B0,000	NAME	CEAHTAIN = P	
STREET ADDRESS CITY-ST-ZIP	2 USHER ST. MILFORD CT 06460		STREET ADDRESS CITY-ST-ZIP	Chesting Ct 06419 Brack OCH Rober R Change Addition	ļ
TITLE	VP	☐ Delete	TITLE	BACHIPOCH RANK! A Change Addit	tion
NAME	BACCHIOCCHI, RACHEL 2 USHER ST.		NAME STREET ADDRESS	SE OIL TOWNER ROLL	- }
STREET ADDRESS CITY-ST-ZIP	MILFORD CT 06460		CITY-ST-ZIP	Cheshing Ct 06 410	
TITLE	TRES	☐ Delete	TITLE	BACCHIOCON JOSEPL X Change Addit	tion
NAME STREET ADDRESS	BACCHIOCCHI, JOSEPH 2 USHER ST.		NAME Street address	fo ow town werke	ŀ
CITY-ST-ZIP	MILFORD CT 06460		CITY-ST-ZIP	Cheshow CF 06410	
TITLE	SEC IOVANNA BACCHIOCCHI , MARY	☐ Delete	TITLE NAME	TOUANNA Brechuh. Marchage Addi	tion
NAME STREET ADDRESS	2 USHER ST.		STREET ADDRESS	85012 towns Rd	
CITY-ST-ZIP	MILFORD CT 06460		CITY-ST-ZIP	Cherhine OT 0640	_
TITLE NAME		☐ Delete	TITLE NAME	Change ☐ Addit	tion
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE NAME	☐ Change ☐ Addit	ion
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP		<u>A</u>	CITY-ST-ZIP	Continue (10.07/0)(i) Florido Canadas Loude	
indicated limited lia	pertify that the information supplied with to on this report is true and accurate and the bility company of the receiver or trustee	misming does not quality for the not my signature shall have the impowered to execute this rep	e exemption stated in same legal effect as ort as required by Ch	in Section 119.07(3)(i), Florida Statutes. I further certify that the information s if made under oath; that I am a managing member or manager of the chapter 608, Florida Statutes.	