

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 14, 2003 8:00 am
Secretary of State

01-14-2003 90035 043 ****50.00

DOCUMENT # L99000008240

1. Entity Name

CHAMBERS PROPERTIES, L.L.C.



Principal Place of Business

**4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR
FORT LAUDERDALE FL 33308**

Mailing Address

**4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR
FORT LAUDERDALE FL 33308**

2. Principal Place of Business

1301 N. Congress Ave

Suite, Apt. #, etc.

Suite 350

City & State

Boynton Beach, FL

Zip

33426

Country

USA

3. Mailing Address

1301 N. Congress Ave

Suite, Apt. #, etc.

Suite 350

City & State

Boynton Beach, FL

Zip

33426

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0971858**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ROSENBERG, ARTHUR R
4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR
FORT LAUDERDALE FL 33308**

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State
Due By May 1, 2003**

9. MANAGING MEMBERS/MANAGERS

TITLE **MGRM** ☐ Delete
NAME **CHAMBERS, NEAL**
STREET ADDRESS **4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE **MGRM** ☐ Delete
NAME **SIKES, SHARON**
STREET ADDRESS **4875 NORTH FEDERAL HIGHWAY, 7TH FLOOR**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1301 N. Congress Avenue, Suite 350**
CITY-ST-ZIP **Boynton Beach, FL 33426**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1301 N. Congress Avenue Suite 350**
CITY-ST-ZIP **Boynton Beach, FL 33426**

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CITY-ST-ZIP

CR2E083 (10/02)

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:

SIGNATURE REQUIRED

01-10-2003

561-752-2951

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

Date

Daytime Phone #