## 2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # M0000000203

1. Entity Name

CRICKET LAKE APARTMENTS, LLC



**FILED** Mar 11, 2003 8:00 am Secretary of State 03-11-2003 90027 030 \*\*\*\*50.00

Principal Place of Business  C/O CONTINENTAL REALTY CORP.  17 WEST PENNSYLVANIA AVE FIFTH FLOOR TOWSON MD 21204		Mailing Address C/O CONTINENTAL REALTY	CORP.	
		17 WEST PENNSYLVANIA A TOWSON MD 21204	VE., FIFTH FLOOR	THE RESIDENCE OF THE PROPERTY
2. Principal Place of Business		3. Mailing Address		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & Star	te	City & State		4. FEI Number 52-1104584 Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired Status Desired Fee Required
<u> </u>	6. Name and Address of Curr			7. Name and Address of New Registered Agent
450 <sup>-</sup>	PLES LAWDOCK, INC 1 TAMIAMI TRAIL NORTH		Name Street Address	s (P.O. Box Number is Not Acceptable)
SUITE 300 NAPLES FL 34103-3060				· · · · · · · · · · · · · · · · · · ·
		•	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				
9.		Make Check Payable Due	By May 1, 2003	
	MGR	MBERS/MANAGERS	10.	ADDITIONS/CHANGES
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CONTINENTAL REALTY INVE 17 WEST PENNSYLVANIA AV TOWSON MD 21204	STORS CORP. E STE 500	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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<ol> <li>I hereby ce indicated or limited liabi</li> </ol>	rtify that the information supplied w n this report is true and accurate ar lity company or the receiver or trust	ith this filing does not qualify for the id that my signature shall have the ee empowered to execute this rep	e exemption stated in Se same legal effect as if m ort as required by Chapte	ction 119.07(3)(i), Florida Statutes. I further certify that the information lade under oath; that I am a managing member or manager of the er 608, Florida Statutes.