

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2003 8:00 am
Secretary of State

05-15-2003 90014 003 ****50.00

0078067

DOCUMENT # M01000000105

1. Entity Name

ATCO NOISE MANAGEMENT LLC



Principal Place of Business

1243 MCKNIGHT BLVD. N.E.
CALGARY ALBERTA AL T2E- 5T1
CA

Mailing Address

1500. 909 - 11 AVENUE S W
CALGARY. ALBERTA AL T2R- 1N6
CA

10104848



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **98-0180102**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 NAME STREET ADDRESS CITY-ST-ZIP | MGR BRITTON, WILLIAM L 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CA T2R- 1N6 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CAMPBELL, JAMES A 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CA T2R- 1N6 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR FRENCH, BASIL K 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CA T2R- 1N6 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR SOUTHERN, NANCY C 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CA T2R- 1N6 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR SOUTHERN, RONALD D 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CA T2R- 1N6 | <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR TWA, CRAIGHTON D 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CA T2R- 1N6 | <input checked="" type="checkbox"/> Delete |

10. ADDITIONS / CHANGES

| | | |
|--|--|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR BRITTON, WILLIAM L. 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA, CANADA T2R 1N6 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR CAMPBELL, JAMES A. 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CANADA T2R 1N6 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR FRENCH, BASIL K. 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CANADA T2R 1N6 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR SOUTHERN, NANCY C. 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CANADA T2R 1N6 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR SOUTHERN, RONALD D. 1600, 909 - 11 AVENUE SW CALGARY, ALBERTA CANADA T2R 1N6 | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGR KMET, WALTER A. 5115 CROWCHILD TRAIL SW CALGARY, ALBERTA CANADA T3E 1T9 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |

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:

JAMES A. CAMPBELL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

MAY 5, 2002 (403) 292-7500

Date

Daytime Phone #

CR2E083 (10/02)