

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED

02 JUL -2 PM 12:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M02000001239

1. Entity Name

ETOR Properties, LLC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

525 Lake Ave South

3. Mailing Address

Same

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Duluth, MN

City & State

4. FEI Number

41-20106797

Applied For

Not Applicable

Zip

55802

Country

USA

Zip

Country

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name

Nelson, Larry W.

Street Address (P.O. Box Number is Not Acceptable)

201 West First Street

City

Sanford

FL

Zip Code

32771

**DO NOT WRITE
IN THIS SPACE**

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

Signature, type or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State
DUE BY MAY 1

100006227781--8

-07/05/02--01067--010

*****55.00 *****55.00

9. MANAGING MEMBERS / MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Paulucci, Jeno F. 201 West First Street Sanford, FL 32771	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM Paulucci, Michael J. 201 West First Street Sanford, FL 32771	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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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:

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

Date

Daytime Phone #

CR2E083B (12/01)