

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92181 025 ****50.00

DOCUMENT # M02000001679

1. Entity Name

PHOENIX/LJH ALTERNATIVE INVESTMENTS LLC



Principal Place of Business

**801 LAUREL OAK DRIVE
NAPLES FL 34108**

Mailing Address

**801 LAUREL OAK DRIVE
NAPLES FL 34108**

2. Principal Place of Business

2640 GOLDEN GATE PARKWAY

3. Mailing Address

2640 GOLDEN GATE PARKWAY

Suite, Apt. #, etc.

205

Suite, Apt. #, etc.

205

City & State

NAPLES, FLORIDA

City & State

NAPLES, FLORIDA

Zip

34105

Country

USA

Zip

34105

Country

USA

4. FEI Number

APPLIED FOR

03-0469188

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$5.00 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



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 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Director, CEO
James R. Hedges, IV
2640 Golden Gate Parkway #205
Naples, Florida 34105**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Director
Donnell A. Segalas
One American Row
Hartford, CT 06102**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Karen S. Cook
Director
650 Madison Ave. 17th Fl.
New York, New York 10022**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Director
Michael Dieschbourg
3908 Kennett Pike
Wilmington, Delaware 19807**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Director
Martin B. O'Connor, II
P.O. Box 979
Elizabeth, New Jersey 07207**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☒ Addition
**Chief Financial Officer
Willis W. Williams, III
2640 Golden Gate Parkway #205
Naples, Florida 34105**

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 of the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

WILLIS W. WILLIAMS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/12/2003

239-403-3030

Date

Daytime Phone #

CR2E083 (10/02)