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

## DOCUMENT # M02000002136

1. Entity Name

SCANNELL PROPERTIES #21, LLC

SIGNATURE: SIGNATURE AND TYPED OR PRINTED



## **FILED** Feb 04, 2003 8:00 am Secretary of State 02-04-2003 90068 001 \*\*\*100.00

						<b></b> ∤					
Principal Place	of Business	3	Mailing Address								
1711 N. PENNSYLVANIA. SUITE 100 CARMEL IN 46032			11711 N. PENNSYLVANIA. SUITE 100 CARMEL IN 46032			 					
2. Principal Pla	ace of Busin	ness	3. Mailing Address			.					
Suite, Apt. #, etc.			Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES					
City & State			City & State	-:		4. FEI Number 35-2111657 Applied For Not Applicable					
Zip	Country		Zìp	Counti	ry	5. Certificate of Status Desired					
			Desistered Agent	<del>-                                    </del>		7. Name and	Address of New Regis				
	6. Name	and Address of Current	Registered Agent	<del></del>	Name						
C T CORPORATION SYSTEM - 1200 SOUTH PINE ISLAND ROAD			•	Street Addres		ss (P.O. Box Number is Not Acceptable)					
PLANTATION FL 33324				ļ		<u> </u>		· <u> </u>			
t.		. * 2		-	City			FL	Zip Code	,	
the obligati	ions of regis	ty, submits this statement for tered agent. d or printed name of registered agen		DTE: Registered	Agent signature req	quired when reinstating)	th, in the State of Florida	DATE	miliar with, a		
			Make Check Payal	ble to Fic ue By Ma	FEE IS \$50.0 orida Departi ay 1, 2003		ADDITIONS/CH	ANGES			
9.	,	MANAGING MEMB		10.			ADDITIONS/GIT		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	11711 N	ell, robert j I. Pennsylvania, sui	□ Delete <b>TE 100</b>						Griange		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SNYDEF 11711 N	. in 46032 R, douglas L I. Pennsylvania, sui . in 46032	Delete			·			☐ Change	Addition	
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CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			☐ Delete	TITL NAM STRI CITY	E AE EET ADDRESS (-ST-ZIP				☐ Change	Addition	
	certify that to d on this rep ability comp	the information supplied wort is true and accurate ar any or the receiver or trus	ith this filing does not qualify nd that my signature shall have lee empowered to execute the	for the exe we the sam disport a	emption stated le legal effect a s required by (	in Section 119.07( is if made under oa Chapter 608, Florid	3)(i), Florida Statutes. I fu ath; that I am a managing a Statutes.	rther cert g membe	ify that the i r or manage	nformation of the	

MAN OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE