

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90047 035 ****55.00

DOCUMENT # M03000000001

1. Entity Name

MICHELLE COURT PROPERTIES, LLC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1452 W. Hiawatha Drive

Suite, Apt. #, etc.

3. Mailing Address

1452 W. Hiawatha Drive

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Appleton, WI

Zip

54914

Country

USA

City & State

Appleton, WI

Zip

54914

Country

USA

4. FEI Number

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Paul Hill

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

1751 Red Cedar Drive #18

City

Fort Myers,

FL

Zip Code

33907

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.

DATE

FEE IS \$50.00

**Make Check Payable to Florida Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	Kenneth C. Hill
STREET ADDRESS	1452 W. Hiawatha Drive
CITY-ST-ZIP	Appleton, WI 54914
TITLE	MGRM
NAME	Elizabeth J. Lefebvre-Hill
STREET ADDRESS	1452 W. Hiawatha Drive
CITY-ST-ZIP	Appleton, WI 54914
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

Elizabeth J. Lefebvre-Hill

SIGNATURE: Elizabeth J. Lefebvre-Hill

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

2/18/03

Date

920-739-2329

Daytime Phone #

CR2E083B (12/02)