

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

001 26 AF

DOCUMENT # M96000000500

1. Entity Name
AMERICA FIRST COMPANIES L.L.C.

00 MAY -5 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1004 FARNAM STREET, SUITE 400
OMAHA NE 68102

Mailing Address
1004 FARNAM STREET, SUITE 400
OMAHA NE 68102-1885



2. Principal Place of Business
Suite, Apt. #, etc.
City & State

3. Mailing Address
Suite, Apt. #, etc.
City & State

DO NOT WRITE IN THIS SPACE

4. FEI Number 47-0776455 Applied For Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

\$ 55.00

9. MANAGING MEMBERS/MEMBERS		10. ADDITIONS/CHANGES	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	MGR YANNEY, MICHAEL B 1004 FARNAM STREET, SUITE 400 OMAHA NE 68102	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR THESING, MICHAEL 1004 FARNAM STREET, SUITE 400 OMAHA NE 68102	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR CARTER, WILLIAM S M.D. 1004 FARNAM STREET, SUITE 400 OMAHA NE 68102	<input type="checkbox"/> Change <input type="checkbox"/> Addition	000003290080-5 -06/14/00--01118--007 *****55.00 *****55.00
<input type="checkbox"/> Delete	MGR KUBAT, GEORGE 1004 FARNAM STREET, SUITE 400 OMAHA NE 68102	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR MASSENGALE, MARTIN 1004 FARNAM STREET, SUITE 400 OMAHA NE 68102	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete	MGR BAER, ALAN 1004 FARNAM STREET, SUITE 400 OMAHA NE 68102	<input type="checkbox"/> Change <input 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

05/01/00

Date

(402) 444-1630

Daytime Phone #

CR2E083 (9/99)