

2001 UNIFORM BUSINESS REPORT (UBR)

0003101 AF

DOCUMENT # M97000000167

1. Entity Name
MICRONAIR, LLC

FILED

01 APR 19 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

11259 PHILLIPS PKWY DR E
JACKSONVILLE FL 32256

Mailing Address

11259 PHILLIPS PKWY DR E
JACKSONVILLE FL 32256

2. Principal Place of Business

12121-A Phillips Hwy
Suite, Apt. #, etc.

3. Mailing Address

12121-A Phillips Hwy
Suite, Apt. #, etc.

City & State

Jacksonville, Fl 32256
Zip Country
32256 - -

City & State

Jacksonville, Fl 32256
Zip Country
32256 - -

4. FEI Number

59-3429613

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

BARRATT, KEITH B
11259 PHILLIPS PKWY DR E
JACKSONVILLE FL 32256

7. Name and Address of New Registered Agent

Name
Barratt, Keith B.
Street Address (P.O. Box Number is Not Acceptable)
12121-A Phillips Hwy
Jacksonville, Fl 32256
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 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/16/01

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

9. MANAGING MEMBERS/MEMBERS

TITLE MGR ☒ Delete
NAME ~~XANER, JONATHAN H~~
STREET ADDRESS 1233 SHELBOURNE RD SUITE E-5
CITY-ST-ZIP SOUTH BURLINGTON VT 05403

TITLE MGR ☒ Delete
NAME ~~PETERS, JAMES H~~
STREET ADDRESS 1233 SHELBOURNE RD SUITE E-5
CITY-ST-ZIP SOUTH BURLINGTON VT 05403

TITLE MGR ☒ Delete
NAME ~~ZIMMERMAN, JONATHAN~~
STREET ADDRESS 1233 SHELBOURNE RD SUITE E-5
CITY-ST-ZIP SOUTH BURLINGTON VT 05403

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE MGR ☒ Change ☐ Addition
NAME Powell, Mary C/O GMP
STREET ADDRESS 163 Acorn Lane
CITY-ST-ZIP Colchester, VT 05446

TITLE MGR DIR ☒ Change ☐ Addition
NAME Mason, Bob
STREET ADDRESS 400 Martindale Rd
CITY-ST-ZIP Shelburne, VT 05482

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
400004084174--0
-04/27/01--01031--024
*****50.00 *****50.00

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 #

4/9/01

802-655-8405

CR2E083 (11/00)