

2000 UNIFORM BUSINESS REPORT (UBR)

APPROVED
AND
FILED

00 MAY -4 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M98000001183

1. Entity Name
UNIROYAL OPTOELECTRONICS, LLC

Principal Place of Business
3401 CRAGMONT DRIVE, BUILDING 500
TAMPA FL 33619

Mailing Address
2 NORTH TAMIAMI TRAIL, SUITE 900
SARASOTA FL 34236-5560



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0841574

Applied For
Not Applicable

Zip Country

Zip Country

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

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 Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE NAME MGRM CURD, HOWARD R ☐ Delete
STREET ADDRESS 2 NORTH TAMIAMI TRAIL, SUITE 900
CITY-ST-ZIP SARASOTA FL 34236

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

TITLE NAME MGRM SORAN, ROBERT L ☐ Delete
STREET ADDRESS 2 NORTH TAMIAMI TRAIL, SUITE 900
CITY-ST-ZIP SARASOTA FL 34236

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS 100003279001--5
CITY-ST-ZIP -06/06/00--01105--023
*****50.00 *****50.00

TITLE NAME MGRM RICHARDS, REUBEN F JR. ☒ Delete
STREET ADDRESS 394 ELIZABETH AVE.
CITY-ST-ZIP SOMERSET NJ 08873

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

TITLE NAME MGRM RUSSELL, THOMAS J ☒ Delete
STREET ADDRESS 2 NORTH TAMIAMI TRAIL, SUITE 900
CITY-ST-ZIP SARASOTA FL 34236

TITLE NAME MGRM FARLEY, CRAIG ☐ Change ☒ Addition
STREET ADDRESS 2 NORTH TAMIAMI TRAIL, SUITE 900
CITY-ST-ZIP SARASOTA, FL, 34236

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGRM CURD, HOWARD F ☐ Change ☒ Addition
STREET ADDRESS 2 NORTH TAMIAMI TRAIL, SUITE 900
CITY-ST-ZIP SARASOTA, FL, 34236

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME MGRM WERTHAM, THOMAS J ☐ Change ☒ Addition
STREET ADDRESS 2NORTH TAMIAMI TRAIL, SUITE 900
CITY-ST-ZIP SARASOTA, FL, 34236

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

4/28/00

(941)361-2100

Date

Daytime Phone #

CR21-083 (9/99)